## P06000 1000 22

(Re	equestor's Name)	
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	<del></del>
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	: Certificates	of Status
Special Instructions to Filing Officer:		
	•	





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## **COVER LETTER**

Division of Corporations
SUBJECT: I-3 media Group, Inc. (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: P06.000   000.22
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for fili
Please return all correspondence concerning this matter to the following:
Horton S. Johnson
(Name of Person)
(Name of Firm/Company)
522 S. Hunt Club Blud., #228 (Address)
(Address)
Apopka, FL 32703 (City/State and Zip Code)
(only, a mount of court)
For further information concerning this matter, please call:
(Name of Person) at (407 ) 454-5701 (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

	.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	Horton S. Johnson (Name of Registered Agent)
	• • • • • • • • • • • • • • • • • • • •
hereby resigns as Registered Agent for	1-3 media Group, Inc. (Name of Corporation)
(Document Number, if known)	·
A copy of this resignation was mailed to t	he above listed corporation at its last known address.
The agency is terminated and the office dithis statement is filed.	scontinued on the 31st day after the date on which
11-1-	11
Hollon s	ture of Resigning Agent)
(Signs	nulse of Resigning Agent)
If signing on behalf of an entity:	
(Ty	ped or Printed Name)  ALE  O7
	AH)
	(Capacity)  FILED  SECRETARY, OF STATE FLORIDA  Chis document: Corporation
	this document:
\$87.50 - Active \$35.00 - Admir	e corporation nistratively dissolved/voluntarily dissolved/

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation