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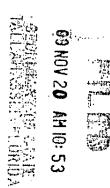
(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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C.COULLIETTE

NUV 24 2009

EXAMINER

ATLANTA

MIAMI ORLANDO

ORLANDO ST. PETERSBURG TALLAHASSEE TAMPA WEST PALM BEACH

CARLTON FIELDS

ATTORNEYS AT LAW

4000 International Place 100 S.E. Second Street Miami, Florida 33131-2114

305.530.0050 305.530.0055 fax www.carltonfields.com

Carlos A. Mas 305.539.7375 direct cmas@carltonfields com

November 17, 2009

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Gentlemen:

Please find enclosed a Resignation of Registered Agent form for Sector Holdings, Inc. Also enclosed is a check No. 477613 in the amount of \$87.50 for the filing fee.

Sincerely,

Carlos A. Mas

15959537.1

RESIGNATION OF REGISTERED AGENT-FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 6	17.1509	•	
Florida Statutes, the undersigned, Carlos A Mas (Name of Registered Agent)			_
hereby resigns as Registered Agent for Sector Holdings, Inc. (Name of Corporation)	as Registered Agent for Sector Holdings, Inc.		
P04000142042			
(Document Number, if known)			•
A copy of this resignation was mailed to the above listed corporation at its last k	nown a	ddress	
The agency is terminated and the office discontinued on the 31st day after the dath this statement is filed. Land 4-M	te on w	AON GO	
(Signature of Resigning Agent)	- 65 A	2 ⊕	131531 131531 1
If signing on behalf of an entity:			
Carlos A. Mas		I0: 53	
(Typed or Printed Name)			
Attorney			
(Capacity)	_		

Fee for filing this document:

\$87.50 - Active corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

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