City/Sta hone # 1633 Broadway Office Use Only w York, NY 10019 CORPORATIOnl. 212 246 5070 OCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time Certified Copy Mail out ☐ Will wait Photocopy Certificate of Status NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/ Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark

Examiner's Initials

Other

CR2E031(195)



Florida Department of State, Jim Smith, Secretary of State

RESIGNATION OF REGISTERED AGENT

SOREC 26 PH D: 01

Pursuant to the provisions of sections 607.0502(2) or 607.1509, Florida Statues, the undersigned, ___C T CORPORATION SYSTEM hereby resigns as (name of registered agent) NETWORK PLUS, INC. Registered Agent for___ (name of corporation) FLORIDA ORGANIZED UNDER THE LAWS OF THE STATE OF A copy of this resignation was mailed to the above listed corporation at its last known address. c/o Richman, Guttenmacher & Bohatch 19 W.Flagler St., 14th. fl. Biscayne Bldg., Miami, Fl. 33130-4410, Att: Scott Richman The agency is terminated and the office discontinued on the 31st day after the date on which the statement was filed.

FEE FOR FILING THIS DOCUMENT:
\$87.50-Active Corporation
\$35.00-Administratively Dissolved Corporation

ASSISTANT SECRETARY

Division of Corporations - P. O. Box 6327 - Tallahassee, FL 32314 CR2E046 (7-90)