13498

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
`	•	
	y/State/Zip/Phone	<u> </u>
(Cit	y/State/Zip/Prione	e # <i>)</i>
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
(50	ourners realizer,	
Control Co.	0 55	101
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
		1
		İ

Office Use Only



400190731014

01/10/11--01033--031 **87.50

11 JAN 10 PH 1:08

RARES
1/18/11

COVER LETTER

TO: Amendment Section Division of Corporations - Cold Volume To the Co
SUBJECT: NJWU Corporation
(Name of Corporation)
DOCUMENT NUMBER: 113698
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rutledge R. Liles
(Name of Person)
225 Water Street, Suite 1500
(Name of Firm/Company)
(Address)
Jacksonville, FL 32202
(City/State and Zip Code)
For further information concerning this matter, please call:
Rutledge R. Liles at (904) 634-1100 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

7

Pursuant to the provisions of sections 60	7.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,Rut	dedge R. Liles
, <u> </u>	(Name of Registered Agent)
hereby resigns as Registered Agent for	NJWU Corporation
	(Name of Corporation)
113698	
(Document Number, if known)	_
A copy of this resignation was mailed to	the above listed corporation at its last known address.
this statement is filed.	discontinued on the 31st day after the date on which
If signing on behalf of an entity:	
Ruth	yped of Printed Name)
Registe	(Capacity) Agent

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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