

595018

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

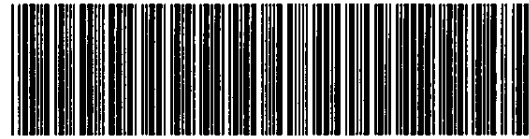
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900188836799

12/27/10--01042--023 \*\*320.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 DEC 27 PM 4:19

APPROVED  
[Signature]

*APPROVED*  
*12/27/10*  
*[Signature]*

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, CFRA, LLC

(Name of Registered Agent)

hereby resigns as Registered Agent for ARCH CREEK NURSING HOME, INC.

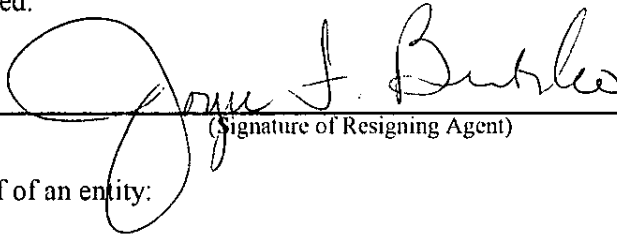
(Name of Corporation)

595018

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



(Signature of Resigning Agent)

If signing on behalf of an entity:

Joyce F. Bentubo

(Typed or Printed Name)

Secretary

(Capacity)

**Fee for filing this document:**

\$87.50 - Active corporation

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withdrawn corporation

RECEIVED  
TALLAHASSEE, FLORIDA  
10 DEC 27 PM 4:19

10 DEC 27 PM 4:19

APPROVED  
10 DEC 27 PM 4:19

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