

858047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

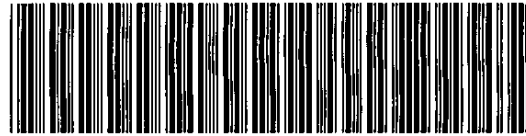
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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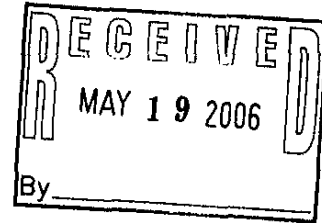
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FILED
06 JUN 23 PM 4:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

As of 30/06
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FLORIDA DEPARTMENT OF STATE
Division of Corporations



May 15, 2006

Robert I. Rubin
Law Offices of SLK
515 North Flagler Dr., Ste. 1600
West Palm Beach, FL 33401-1501

SUBJECT: FRONTIER INSURANCE COMPANY
Ref. Number: 858047

To resign as registered agent for an inactive corporation, the enclosed resignation form should be completed and returned with a filing fee of \$35.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne
Senior Section Administrator

Letter Number: 306A00034189

LAW OFFICES OF

SLK

STEPHENS LYNN KLEIN
LA CAVA HOFFMAN & PUYA, P.A.

Robert I. Rubin
Attorney At Law
E-Mail rubinr@stephenslynn.com

515 North Flagler Dr., Ste. 1600
West Palm Beach, FL 33401
Telephone 561-655-1500
Fax 561-659-2093
Florida Wats 800.329-1501

June 20, 2006

Florida Department of State
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

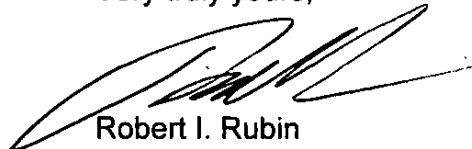
Re: Frontier Insurance Company - Resignation of Registered Agent
Your Reference No.: 858047

Dear Sir/Madam:

Pursuant to your request, enclosed please find a check in the amount of \$35.00, made payable to the Florida Department of State, Division of Corporations," along with the requested executed Cover Letter and Resignation Of Registered Agent For A Corporation.

Please do not hesitate to contact me should you have any questions.

Very truly yours,



Robert I. Rubin

RIR/klk
Enclosure

cc: Frontier Insurance Company of New York
Attention: New York State Rehabilitator

H:\LIBRARY\RIR\Frontier\DivOfCorps FloridaDeptOfState.ResignationAsRegisteredAgent.Checks.ExecutedForms.wpd

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FRONTIER Insurance Company of New York
(Name of Corporation)

DOCUMENT NUMBER: _____

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:

Robert I. Rubin
(Name of Person)

Stephens, Lynn Klein
(Name of Firm/Company)

515 N. Flagler Drive
(Address)

West Palm Beach, FL 33401
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert I. Rubin at (561) 655-1500
(Name of Person) (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

FILED

RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION

JUN 23 PM 4:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Florida Statutes, the undersigned, Robert I. Rubin
(Name of Registered Agent)

hereby resigns as Registered Agent for FRONTIER INSURANCE COMPANY
(Name of Corporation)

858047
(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:

Robert I. Rubin
(Typed or Printed Name)

(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