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(Address)	400076408384
(City/State/Zip/Phone #)	06/23/0601010009 **35.00
(Business Entity Name) (Document Number)	To O
Certified Copies Certificates of Status	FILED SECRETARY OF ST TALLAHASSEE, FLO
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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

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

LAW OFFICES OF



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/kik

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

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

Fort Lauderdale Office Telephone 954,462,4602 Florida Wats 800,329,4602 Tampa Office Telephone 813.209.9611 Florida Wats 800.329.8600 West Palm Beach Office Telephone 561.655.1500 Florida Wats 800.329.1501

COVER LETTER

TO: Amendment Section Division of Corporations

FRONTIAN INSURANCE COMPANY of NEW York (Name of Corporation) SUBJECT:

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. RAB.N (Name of Person) Stephens, Lynn, Lle.N (Name of Firm/Company) 515 N. Flaglon Drive (Address) West Palm Beach FL 33401 (City/State and ZipCode)

For further information concerning this matter, please call:

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

CR2E046(08/05)

FILED

RESIGNATION OF REGISTERED AGEDGTJUN 23 PM 4: 34 FOR A CORPORATION

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, <u>Robert J. Rub.</u> (Name of Registered Agent)	
(Name of Registered Agent)	
hereby resigns as Registered Agent for Frontier Insuland (among (Name of Corporation)	

85804 (Document Number, if known)

(Document Number, it 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. (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