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From:

Account Name

: THOMAS C. COBB P.A.

Account Number : 110670000060

Phone

: (305)571-8062

Fax Number

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REGISTERED AGENT RESIGNATION

NMBP ASSOCIATES, LTD.

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Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efileovr.exe

when

4/7/2008

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RESIGNATION OF REGISTERED AGENT FOR LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

Pursuant to the provisions of section 620.1116, Florida Statutes, the	e undersigned,	
Linda Ebin, Esq.	, hereby resigns as	
(Name of Registered Agent)		
Registered Agent for NMBP ASSOCIATES, LTD.		
(Name of Limited Partnership or Limited Li	iability Limited Partnership)	
A02000000619		
(Florida Document Number, if known)		
The agent is terminated on the 31st day after the date on which the Florida Department of State. Signature of Registered Agent	OR APR	חד
If signing on behalf of an entity:	R-7 PH	= n
Typed or Printed Name	SJAT FLORR	j
Capacity	——————————————————————————————————————	

Filing Fee: \$87.50 Certified Copy (optional): \$52.50