

F0200000644

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

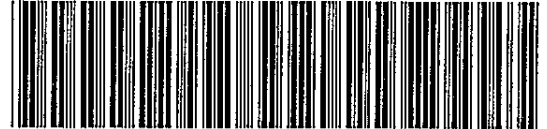
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/27/04--01048--002 **35.00

04 JUL 27 AM 13:09
SECRETARY OF STATE
TALLAHASSEE, FL 32301

FILED

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CT CORPORATION

July 21, 2004

RE: FP FINANCE CORPORATION (NV. DOM.)

Secretary of State
Corporate Records Bureau
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporations. Also enclosed is 1 check in the amount of \$ 35.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri
Senior Supervisor &
Assistant Secretary

TA:ld
Enclosure

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

FILED
04 JUL 27 AM 10:09
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509
Florida Statutes, the undersigned, C T CORPORATION SYSTEM
(Name of Registered Agent)
FP FINANCE CORPORATION (NV. DOM.)
hereby resigns as Registered Agent for _____
(Name of Corporation)

F02000000644

(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:

C T CORPORATION SYSTEM - THERESA ALFIERI

(Typed or Printed Name)

ASSISTANT SECRETARY

(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withdrawn corporation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