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(Re	questor's Name)		
(Ad	dress)	 -	
(Ad	dress)		
(, (G	u.000)		
(City/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(50	Siliess Chilly Hall	ne)	
(Do	cument Number)		
Certified Copies	_ Certificates of Status		
	m.,		
Special Instructions to	Filing Officer:		
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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: NORTH AMERICAN I	BUS INDUSTRIES, INC.
(Name DOCUMENT NUMBER: F02000001721	ne of Corporation)
The enclosed Resignation of Registered Agent for	for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this	is matter to the following:
Tiffany Roth	
(Name of Person)	
National Corporate Research	ch, Ltd.
(Name of Firm/Company)	
615 S. Dupont Hwy	
(Address)	
Dover, DE 19901	
(City/State and Zip Code)	
For further information concerning this matter, p	please call:
Tiffany Roth	(Area Code & Daytime Telephone Number)
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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, National Corporate Research, Ltd. (Name of Registered Agent)			
hereby resigns as Registered Agent for NORTH AMERICAN BUS INDUSTR	IES, IN	C.	
(Name of Corporation)			
F02000001721			
(Document Number, if known)			
A copy of this resignation was mailed to the above listed corporation at its last kno	wn addre	ess.	
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	on which	1	
- An	įmilų.		
(Signature of Resigning Agent)		ĊΤ	
If signing on behalf of an entity:		ΝΫ́	(1
		30	
Florence Spelzhausen		p	
(Typed or Printed Name)		r 🖫	
	n filter	50	
Assistant Secretary	ι.,		
(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withdrawn corporation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