Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : NATIONAL REGISTERED AGENTS, INC.

Account Number : 120030000062 Phone : (609)716-0300

Fax Number : (609)716-0820



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(HO80002588643)

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Florida Statutes, the undersigned, NRAI Services, Inc. (Name of Registered Agent) hereby resigns as Registered Agent for Custom Mortgage Solutions, Inc. (Name of Corporation) F02000004351 (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. NRAI Services, Inc. (Name of Registered Agent) The agency 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. NRAI Services, Inc. (Name of Registered Agent) The agency 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. NRAI Services, Inc. (Name of Registered Agent) The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. NRAI Services, Inc. (Name of Registered Agent) The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. NRAI Services Agent (Signaffice Agent) The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. NRAI Services Agent (Signaffice Agent) The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. NRAI Services Agent (Signaffice Agent) The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. The agency is the agency is the agency is a statement in	rursuant to the provisions of sections 607.0	1302(2), 617.0302(2), 607.1309, or 617.1309,	
(Name of Registered Agent) hereby resigns as Registered Agent for Custom Mortgage Solutions, Inc. (Name of Corporation) F02000004351 (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: (Typed or Printed Name) (Capacity)	Florida Statutes, the undersigned,	med, NRAI Services, Inc.	
(Name of Corporation) F02000004351 (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. Services (Signature of Resigning Agent) If signing on behalf of an entity: (Typed or Printed Name) Assistant Secretary (Capacity)		(Name of Registered Agent)	
F0200004351 (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. Securices (Signature of Resigning Agent) If signing on behalf of an entity: (Typed or Printed Name) Assistant Security)	hereby resigns as Registered Agent for		
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. Secology (CS) (CS) (CS) (CS) (CS) (CS) (CS) (CS)	F02000004351	(
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. What Services Inc. (Signature of Resigning Agent) If signing on behalf of an entity: (Typed or Printed Name) Assistant Secretary (Capacity)	(Document Number, if known)		
this statement is filed. What Securities Inc. (Signafure of Resigning Agent) If signing on behalf of an entity: (Typed or Printed Name) Assistant Secretory (Capacity)	A copy of this resignation was mailed to the	e above listed corporation at its last known address.	
Typed or Printed Name) Assistant Secretory (Capacity)	this statement is filed. NRAI Second	ites, inc.	
(Typed or Printed Name) ASSISTANT SecretorY (Capacity)	If signing on behalf of an entity:		
(Typed or Printed Name) ASSISTANT SecretorY (Capacity)	Levie	_nton E =	TE
Assistant Secretory 3	(Турс	ed or Printed Name)	ender.
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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

(1+080002588443)