## F02000005444

(Re	questor's Name)	•
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Viol	uiossy	
(Cit	y/State/Zip/Phon	e #)
	<b>,</b>	r
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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: NATIONAL STANDARDS INSTITUTE, INC	
(Name of Corporation	011)
DOCUMENT NUMBER: F02000005444	<u> </u>
The enclosed Resignation of Registered Agent for a Corpora	tion and fee are submitted for filing.
Please return all correspondence concerning this matter to the	e following:
Valerie Molgard	
(Name of Person)	<u> </u>
Paracorp Incorporated	
(Name of Firm/Company)	
P.O. Box 160568	in the second se
(Address)	* · · · · · · · · · · · · · · · · · · ·
Sacramento, CA 95816	
(City/State and Zip Code)	ing the second of the second o
For further information concerning this matter, please call:	
Valerie Molgard at ( 888)	272-5449
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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"FFD" E
DESIGNATION OF RECISTERED AGENT ESEC. 79
EOD A CORPORATION
FOR A CORPORATION
5. E. E. S. T.
RESIGNATION OF REGISTERED AGENT TO SECRET AND SECRET AN
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Paracorp Incorporated
(Name of Registered Agent)
hereby resigns as Registered Agent for NATIONAL STANDARDS INSTITUTE, INC.
nereby resigns as Registered Agent for (Name of Corporation)
· · · · · · · · · · · · · · · · · · ·
F0200005444
(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.
~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
Denn Allrey
(Signature of Resigning Agent) DENISE ZOLLNER, ASSISTANT SECRETARY, PARACORP INCORPORATED
If signing on behalf of an entity:
(Typed or Printed Name)
(Typed of Filmed Name)

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

(Capacity)