

F030000006074

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2-2-05
OK Per CM

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AMCAP MORTGAGE, INC.
(Name of Corporation)

DOCUMENT NUMBER: F03000006074

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert B. Williams

(Name of Person)

AMCAP MORTGAGE, INC.

(Name of Firm/Company)

P.O. Box 760

(Address)

Bolton, MA 01740

(City/State and Zip Code)

For further information concerning this matter, please call:

Robert B. Williams

(Name of Person)

at (802) 287-2041

(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

January 10, 2005

ROBERT B. WILLIAMS
P.O. BOX 760
BOLTON, MA 01740

SUBJECT: AMCAP MORTGAGE, INC.
Ref. Number: F03000006074

We have received your document for AMCAP MORTGAGE, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records do not indicate that you are an officer, director, or registered agent of the subject corporation. Therefore, no resignation is required.

Enclosed is an application for refund. Please sign and return and allow at least 60 to 90 days for the refund to be processed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Document Specialist

Letter Number: 905A00001602

Woodrow "Mac" Melvin, Jr.

Professional Association

Attorney at Law

Coconut Grove Bank Building

Suite 302

2701 South Bayshore Drive

Miami, Florida 33133-5359

Phone: 305-854-6129 Facsimile: 305-854-3271

MelvinPA@bellsouth.net

Woodrow M. Melvin, Jr.

.....
Woodrow M. Melvin, Sr.
(1912-1994)

FACSIMILE COVER LETTER

PLEASE DELIVER THE FOLLOWING PAGES TO:

TO: Darlene Connell
Florida Department of State

FROM: Woodrow "Mac" Melvin, Jr., P.A.

DATE: February 2, 2005

FAX NO: 850-245-6897

CASE NAME: Re: Resignation of Registered Agent

TOTAL NUMBER OF PAGES INCLUDING COVER LETTER: 3

Darlene,
Attached as requested is a copy of the cancelled check and the resignation letter that was forwarded to your offices on December 15, 2004. Thank you.
Melanie

IF YOU DO NOT RECEIVE ALL THE PAGES, PLEASE CALL (305) 854-6129.

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS ATTORNEY PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE (IF LONG DISTANCE, PLEASE CALL COLLECT) AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

HARD COPY TO FOLLOW ____ HARD COPY NOT TO FOLLOW _X

2-2-05

**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, Woodrow "Mac" Melvin, Jr., P.A.

(Name of Registered Agent)

hereby resigns as Registered Agent for AMCAP MORTGAGE, INC.

(Name of Corporation)

F03000006074

(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:

Woodrow M. Melvin, Jr.

(Typed or Printed Name)

President

(Capacity)

FILED
05 FEB -2 PM 3:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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