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Office Use Only



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R.A. Resign.

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AUG 2 6 2009

COVER LETTER

| TO: Amendment Section Division of Corporations | , |
|--|---|
| SUBJECT: Phoenix Telecommu | nication Group, Inc. |
| | (Name of Corporation) |
| DOCUMENT NUMBER: F0400 | 00002597 |
| The enclosed Resignation of Registe | ered Agent for a Corporation and fee are submitted for filing. |
| Please return all correspondence cor | ncerning this matter to the following: |
| Kathryn Williams | |
| (Name of Perso | on) |
| Registered Agents Legal Service | es, LLC |
| (Name of Firm/Cor | npany) |
| 1220 N Market Street, Suite 800 | 3 |
| (Address) | |
| Wilmington, DE 19801 | |
| (City/State and Zip | Code) |
| For further information concerning t | his matter, please call: |
| Kathryn Williams | at (800) 400-6650 |
| (Name of Person) | at (800) 400-6650 (Area Code & Daytime Telephone Number) |
| Enclosed is a check made payable to or \$35.00 for an administratively dis | the Florida Department of State for \$87.50 for an active corporation solved, voluntarily dissolved or withdrawn corporation.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 |
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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

| RESIGNATION OF REGISTERED AGENT FOR A CORPORATION Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Registered Agents Legal Services, Trock |
|---|
| SEE OF SIA |
| Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, |
| Florida Statutes, the undersigned, Registered Agents Legal Services, Inc. (Name of Registered Agent) |
| hereby resigns as Registered Agent for Phoenix Telecommunication Group, Inc. (Name of Corporation) |
| F0400002597 |
| (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. |
| Hille Calle |
| (Signature of Resigning Agent) |
| If signing on behalf of an entity: |
| MICHAEL W. ASHLEY (Typed or Printed Name) |
| Penistered Agent |

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