

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: INCORPORATING SERVICES FL

Account Number: I20050000052

Phone

: (302)531-0855

Fax Number

: (850) 656-7953

REGISTERED AGENT RESIGNATION

ATLANTIC BUSINESS CAPITAL, INC.

Certificate of Status	
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Corporate Filing Menu

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COVER LETTER

TO:	Amendment Section Division of Corporations
SURI	JECT: ATLANTIC BUSINESS CAPITAL, INC.
~~~	(Name of Corporation)
DOC	UMENT NUMBER: F04000004669
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
Edie	e Whitebread
	(Name of Person)
INC	ORPORATING SERVICES, LTD.
	(Name of Firm/Company)
350	0 S. DUPONT HWY.
	(Address)
DOV	VE, DE 19901
	(City/State and Zip Code)
For fu	orther information concerning this matter, please call:
Edie	(Name of Person) at (800 ) 346-4646 (Area Code & Daytime Telephone Number)

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

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

## 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, INCORPORATING SERVICES LTD.
(Name of Registered Agent)  hereby regigns as Registered Agent for ATLANTIC BUSINESS CAPITAL, INC.
hereby resigns as Registered Agent for (Name of Corporation)
F04000004669
(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 discentinued on the 31st day after the date on which this statement is filed.  (Signature of Resigning Agent)
If signing on behalf of an entity:
CANDICE B. SWETLAND
(Typed or Printed Name)
ASSISTANT SECRETARY
(Capacity)

Make cheeks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/

Fee for filing this document: \$87.50 - Active corporation