## F05000002439

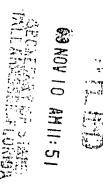
(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



600162578876

11/10/09--01027--014 \*\*35.00



R.A. Resign C.COULLIETTE

NOV 13 2009

**EXAMINER** 





212 894 8940 tel 212 590 9180 fax www.ctlegalsolutions.com

November 6, 2009

RE: BERGIN FINANCIAL, INC. (MI. DOM.)

Department of State
Division of Corporations
Clifton Building
261 Executive Center Circle
Tallahassee, Florida 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is <u>1</u> check in the amount <u>35.00</u> to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self- address envelope.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:lf Enclosure

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.	1509, or 617.1509,	
Florida Statutes, the undersigned,	C T CORPORATION	SYSTEM	
	(Name of Registered Agent)		
hereby resigns as Registered Agent for	BERGIN FINANCIAL, INC.	` ,	
	(Name of Corpor	ation)	
F05000002439			
(Document Number, if known)			
A copy of this resignation was mailed t	o the above listed corporation	at its last known address.	
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day a	fter the date on which	
The	Oelf		
(Si	gnature of Resigning Agent)		
If signing on behalf of an entity:	$\mathcal{U}$		
C T CORPORA	ΓΙΟΝ SYSTEM - THERESA AL	FIERI TO THE STATE OF THE STATE	
	(Typed or Printed Name)		
AS	SISTANT SECRETARY		
•	(Capacity)		

## 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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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