F05000003060

(Re	equestor's Name)	
. (Ad	dress)	
(Ad	dress)	
, (Cit	y/State/Zip/Phon	e #)
PICK-UP		MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	<u></u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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ZECNETARY OF STATE

Office Use Only

R.A. Resignation

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Resignation of Registered Agent for a Corporation

Capitol Corporate Services, Inc.

PO Box 1831 Austin, TX 78767

Phone: 800-345-4647 Fax: 800-432-3622 regagent@capitolservices.com

Secretary of State **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

DATE: STATE:

11/17/2008 **FLORIDA**

REP UNIT:

NAP GRAND CAYMAN PARTNERS

GP, INC.

Enclosed for filing please find a Resignation of Registered Agent for a Corporation for the above referenced name, which is to be filed in your office. Enclosed is check # 15394 in the amount of 35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call 800-345-4647 and ask for the Registered Agent Department.

COVER LETTER

Division of Corporations
SUBJECT: NAP GRAND CAYMAN PARTNERS GP, INC. (Name of Corporation)
DOCUMENT NUMBER: F05000003060
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:
RHONDA MAYBIN (Name of Person)
Capitol Corporate Services, Inc. (Name of Firm/Company)
800 Brazos, Suite 400 (Address)
Austin, Texas 78701 (City/State and Zip Code)
For further information concerning this matter, please call:
RHONDA MAYBIN at (800) 345-4647 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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
Tallahassec, FL 32314

TO:

Amendment Section

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections (507.0502(2), 617.0502(2), 607.1509, or 61	17.1509,
Florida Statutes, the undersigned,	Capitol Corporate Services, Inc. (Name of Registered Agent)	
hereby resigns as Registered Agent for	NAP GRAND CAYMAN PARTNER (Name of Corporation)	RS GP, INC.,
F05000003060		
(Document Number, if known)		
A copy of this resignation was mailed to	to the above listed corporation at its last k	nown address.
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day after the da	te on which
Chl	MACONALS ignature of Resigning Agent)	Fig. 7
If signing on behalf of an entity:		製品に
<u> </u>	Cheryl Roberts (Typed or Printed Name)	PH 1:57
	President	y

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)