## F06000007916

(Re	questor's Name)			
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	. WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Do	cument Number)			
Certified Copies	_ Certificate:	s of Status		
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resignation 972 RA

> DEPARTMENT OF STATE VISION OF CORPORATIONS TALL SMASSEF FLORIDA

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ACCOUNT NO. : I2000000195

REFERENCE :

066933

7819783

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ORDER DATE :	January 19,
ORDER TIME :	9:46 AM
ORDER NO. :	066933-155
CUSTOMER NO:	7819783

## FOREIGN FILINGS

NAME:

TELECOM NEW ZEALAND USA

LIMITED INC.

	CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY
XXXX A	MENDMENT
PLEASE	RETURN THE FOLLOWING AS PROOF OF FILING:
xx	CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTAC	T PERSON: Stephanie Milnes EXT# 2920
	EXAMINER:

## RESIGNATION OF REGISTERED AGENT JAN 23 PH 3 25 FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, TCS Corporate Services, Inc. Florida Statutes, the undersigned, (Name of Registered Agent) hereby resigns as Registered Agent for \_\_Telecom New Zealand USA Limited Inc. (Name of Corporation) F06000007916 (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:

Keith Nichols (Typed or Printed Name) Vice President (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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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