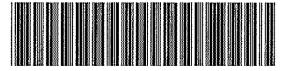
FOIII

(Re	questor's Name)	
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ie)
(00	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
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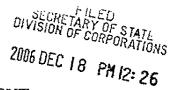
Cs 12/20/060 HUS

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Berkehire Holding Carp (Nampfor Corporation)
DOCUMENT NUMBER:
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:
HNDRE Noiseux (Name of Person)
Berkshire Holding Corp. (Name of Firm Company)
40 Harbour Drive S.
Ocean Ridge FL 33435 (Sity/State and Zip Code)
For further information concerning this matter, please call:
ANDRE NoisE vx at (SU) 573-5769 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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
Tallahassee, FL 32314



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, HNDRE NOISEUX
(Name of Registered Agent) hereby resigns as Registered Agent for Berkhül Holding Case
(Name of Corporation)
+0/11
(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.
andre Houseuns
(Signature of Resigning Agent)
If signing on behalf of an entity:
(Typed or Printed Name)
(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