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(Address) (City/State/Zlp/Phone ##)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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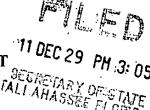
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## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60	07.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM
	(Name of Registered Agent)
	STONEWATER MORTGAGE CORPORATION
hereby resigns as Registered Agent for	(Name of Corporation)
	(ivalie of corporation)
F08000000824	
(Document Number, if known)	<del></del>
A copy of this resignation was mailed to	the above listed corporation at its last known address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which
	gnature of Resigning Agent)
(Sig	nature of Reargning Agent)
If signing on behalf of an entity:	
C T CORPORAT	ION SYSTEM - THERESA ALFIERI
(7)	Typed or Printed Name)
ASS	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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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