## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporation's

Fax Number : (850) 617-6380

From:

Account Name -- PERLMAN, BAJANDAS

Account Number : I20040000167

: (305)377-0809

: (305)377-0781

\*\*Enter the email address for this business entity to be used for fu annual report mailings. Enter only one email address please.

REGISTERED AGENT RESIGNATION NORTHERNROCK HOLDINGS GROUP, INC.

Certificate of Status	0
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Estimated Charge	\$87.50

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## **COVER LETTER**

	ECT: NORTHERNROCK HOLDINGS GROUP, II (Name of Corporati	on)	•	
DOC	UMENT NUMBER: F1000001831	· · ·		٠,
The er	nclosed Resignation of Registered Agent for a Corpora	ition and fee are subr	nitted for filing	g
Please	return all correspondence concerning this matter to the	e following:		
Laur	a Jacobson			,
<del></del>	(Name of Person)		•	,
Perir	nan, Bajandas, Yevoli & Albright, P.L.		•	
	(Name of Firm/Company)	•		
200 \$	S. Andrews Ave., Suite 600	•		
	(Address)	N E CAMPA DE DE MERCE DE C		
Ft. La	auderdale, FL 33301		• ,	
	(City/State and Zip Code)	•		
For fu	ther information concerning this matter, please call:	•	• .	
Laura	Jacobson at ( 954	566-7117		
	(Name of Person) (Area Code	& Daytime Telephone	Number)	

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

CR2E046(08/05)

(FAX)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
TESIGNATION OF REGISTERED AGENT
FOR A CORPORATION

Pursuant to the provisions of sections	\$ 007.0302(2), 617.0302(2), 007.1309, 0F 017.1309,
Florida Statutes, the undersigned,	Perlman, Bajandas, Yevoli & Albright, P.L.
	(Name of Registered Agent)
hereby resigns as Registered Agent for	or NORTHERNROCK HOLDINGS GROUP, INC.
	(Name of Corporation)
F10000001831	
(Document Number, if known)	<del></del>
	d to the above listed corporation at its last known address.  ice discontinued on the 31st day after the date on which
·	(Signature of Resigning Agent)
If signing on behalf of an entity:	
Edward T. Yevo	•
	(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

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