

CT CORPORATION SYSTEM

1633 Broadway
New York, NY 10019

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

F94000000365

1. _____ (Corporation Name) _____ (Document #)

400003052904--0

-11/23/99--01042--009

*****35.00 *****35.00

2. _____ (Corporation Name) _____ (Document #)

3. _____ (Corporation Name) _____ (Document #)

4. _____ (Corporation Name) _____ (Document #)

- | | | |
|-----------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Walk in | <input type="checkbox"/> Pick up time | <input type="checkbox"/> Certified Copy |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait | <input type="checkbox"/> Photocopy |
| | | <input type="checkbox"/> Certificate of Status |

NEW FILINGS

AMENDMENTS

- | | |
|--|--|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment |
| <input type="checkbox"/> Not for Profit | <input checked="" type="checkbox"/> Resignation of R.A. Officer/Director |
| <input type="checkbox"/> Limited Liability | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Domestication | <input type="checkbox"/> Dissolution/Withdrawal |
| <input type="checkbox"/> Other | <input type="checkbox"/> Merger |

OTHER FILINGS

REGISTRATION/QUALIFICATION

- | | |
|--|--|
| <input type="checkbox"/> Annual Report | <input type="checkbox"/> Foreign |
| <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> Limited Partnership |
| | <input type="checkbox"/> Reinstatement |
| | <input type="checkbox"/> Trademark |
| | <input type="checkbox"/> Other |

FILED
99 NOV 23 PM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Examiner's Initials

W 12-6



Florida Department of State, Jim Smith, Secretary of State

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2) or 607.1509, Florida Statutes, the

undersigned, C T CORPORATION SYSTEM hereby resigns as
(name of registered agent)

Registered Agent for NATIONWIDE LONG DISTANCE, INC.
(name of corporation)

ORGANIZED UNDER THE LAWS OF THE STATE OF TEXAS

A copy of this resignation was mailed to the above listed corporation at its last known address.

P.O. Box 572338
Houston, Tx. 777257
Att: Bill Meridith

The agency is terminated and the office discontinued on the 31st day after the date on which the statement was filed.


SIGNATURE
ASSISTANT SECRETARY

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEE FOR FILING THIS DOCUMENT:

\$87.50-Active Corporation

\$35.00-Administratively Dissolved Corporation

Division of Corporations - P. O. Box 6327 - Tallahassee, FL 32314
CR2E046 (7-90)