98000005024

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
:		





600209458996

07/86/11--01016--017 **210.00

R.A. Resign.
TBrown

212 894 8940 tel 212 590 9180 fax www.ctlegalsolutions.com

June 29, 2011

RE: COFINANCIAL, INC. (MI. DOM.)

DELTA-T CORPORATION. (VA. DOM.)
DM INTERNATIONAL INC. (DE. DOM.)
EMPIRE EQUITY GROUP, INC. (NY. DOM.)

MCCARE HOMES, INC. (GA. DOM.)

SOUTHEASTERN INDUSTRIAL ELECTRICAL

CONTRACTORS, INC. (GA. DOM.)

Department of State
Division of Corporations
Clifton Building
261 Executive Center Circle
Tallahassee, Florida 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process-for-the above corporation.—Also enclosed is—<u>1</u>-check-in-the amount <u>210.00</u> to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self- address envelope.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:lf Enclosure

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

TALLAHASSEE. FLORIOA Pursuant to the provisions of sections 607 0502(2) 617 0502(2) 607 1500 or 617 1500

i disuant to the provisions of sections of	07.0302(2), 017.0302(2), 007.1303, 01017.1303,
Florida Statutes, the undersigned,hereby resigns as Registered Agent for	C T CORPORATION SYSTEM
	(Name of Registered Agent)
	EMPIRE EQUITY GROUP, INC. (NY. DOM.)
	(Name of Corporation)
F98000005024	
(Document Number, if known)	
A copy of this resignation was mailed t	o 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
LA .	lay
(Si	gnature of Resigning Agent)
If signing on behalf of an entity:	V
C T CORPORA	ΓΙΟΝ SYSTEM - THERESA ALFIERI
	Typed or Printed Name)
AS	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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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