

J91245

At Corp

(Requestor's Name)

111 Eight Ave

(Address)

Ny Ny 10011

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

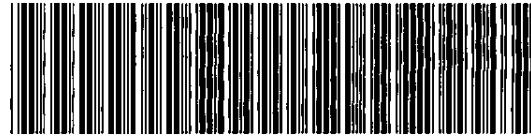
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

11 JUN -2 PM 3:13

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06/02/11--01029--006 **140.00

RA Resign
Tewes
6-7-11



111 Eighth Avenue
New York, NY 10011

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

May 25, 2011

RE: POST RETIREMENT LIABILITY MANAGEMENT, INC. (FL. DOM.)
Q LAKE PICKETT GP, INC. (TX. DOM.)
RENTAL LIABILITY MANAGEMENT, INC. (FL. DOM.)
REPUBLIC GUY SALMON PARTNER, INC. (FL. DOM.)

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is 1 check in the amount of \$140.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (hm)

Theresa Alfieri
Senior Supervisor &
Assistant Secretary

TA/hm
Enclosure

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

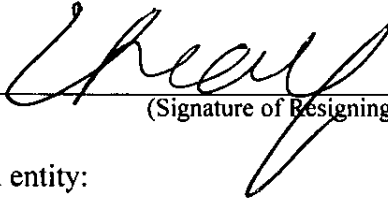
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, C T CORPORATION SYSTEM
(Name of Registered Agent)
hereby resigns as Registered Agent for RENTAL LIABILITY MANAGEMENT, INC.
(FL. DOM.) (Name of Corporation)

J91245

(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.



(Signature of Resigning Agent)

If signing on behalf of an entity:

C T CORPORATION SYSTEM - THERESA ALFIERI

(Typed or Printed Name)

ASSISTANT SECRETARY

(Capacity)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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