

Requester's Name  
Address  
City/State/Zip Phone #

**CORPORATION** **National Institute For Financial Education**  
10688 N.W. 48th Street, Coral Springs, Florida 33076

Office Use Only

f known):

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

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\*\*\*\*\*157.50 \*\*\*\*\*87.50

- ☐ Walk in ☐ Pick up time ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

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01 AUG 10 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K34411  
8-10-01  
RA Res OM  
288

Examiner's Initials

## RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, Jonelle A. Lees

(Name of registered agent)

hereby resigns as Registered Agent for

NATIONAL INSTITUTE FOR FINANCIAL EDUCATION, INC.  
(Name of corporation)

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.

x Jonelle A. Lees  
(Signature of resigning agent)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### Fee for filing this document:

- \$87.50 - Active corporation
- \$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Requester's Name  
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City/State/Zip  
Phone #

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