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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: American Debt Consolidators, In = (Name of Corporation)
DOCUMENT NUMBER: NO200009976
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Darren Lasto Bley (Name of Person)
(Name of Firm/Company)
10037 Lexington Estates Blud (Address)
Beca Raton FL 33428 (City/State and Zip Code)
For further information concerning this matter, please call:
Darren (astofsky at (5761) 542-9059 (Name of Person) at (5761) 542-9059 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314



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, Davier Lasto fsky (Name of Registered Agent)
hereby resigns as Registered Agent for Ame/(Can Deht Cansol doubors, lu (Name of Corporation)
(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:
(Typed or Printed Name)
(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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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