

NO3000005783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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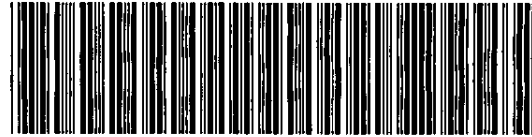
(Business Entity Name)

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Resignation
To RA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 NOV - 1 PM 4:17

FILED

DR
11/6/13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CRESTWELL HIGHER LEARNING SCHOOL, INC.
(Name of Corporation)

DOCUMENT NUMBER: N03000005783

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:

Jeffrey Drew Butt

(Name of Person)

Squire Sanders (US) LLP

(Name of Firm/Company)

201 North Franklin Street, Suite 2100

(Address)

Tampa, Florida 33602

(City/State and Zip Code)

For further information concerning this matter, please call:

Jeffrey Drew Butt

(Name of Person)

at (813) 202-1300

(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, and 617.1509,

Florida Statutes, the undersigned, ANDREW SERVICE CORPORATION OF FLORIDA

(Name of Registered Agent)

hereby resigns as Registered Agent for CRESTWELL HIGHER LEARNING SCHOOL, INC.

(Name of Corporation)

N03000005783

(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.

Jeffrey Drew Butt, as authorized agent
(Signature of Resigning Agent)

If signing on behalf of an entity:

Jeffrey Drew Butt

(Typed or Printed Name)

Authorized Agent
(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