

N 98000004995

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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16 FEB 25 PM 8:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DIAPAS

FEB 26 2016

R. White



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 28, 2016

SAMUEL S GOREN
3099 E COMMERCIAL BLVD STE 200
FORT LAUDERDALE, FL 33307

SUBJECT: NORTH BROWARD HOSPITAL DISTRICT CHARITABLE
FOUNDATION, INC.
Ref. Number: N98000004995

We have received your document for NORTH BROWARD HOSPITAL DISTRICT CHARITABLE FOUNDATION, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to resign as registered agent of an active corporation is \$87.50.

There is a balance due of \$17.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II

Letter Number: 316A00001961

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**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, Samuel S. Goren

(Name of Registered Agent)

hereby resigns as Registered Agent for NORTH BROWARD HOSPITAL DISTRICT CHARITABLE FOUNDATION, INC.

(Name of Corporation)

N98000004995

(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.

Samuel S. Goren

(Signature of Resigning Agent)

If signing on behalf of an entity:

Samuel S. Goren

(Typed or Printed Name)

shareholder

(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withdrawn corporation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

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

16 FEB 25, PM 8:26

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