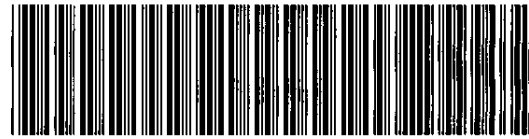


PO 4000035155



900207640409

05/18/11--01022--005 **35.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAY 18 PM 1:59

R.A. Resign
C.COULLETTE

MAY 24 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FINGERSHIELD SAFETY (USA) INC.
(Name of Corporation)

DOCUMENT NUMBER: P04000035155

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:

Jenny Kalota
(Name of Person)

Contega Business Services, LLC
(Name of Firm/Company)

One Independent Drive, Suite 1200
(Address)

Jacksonville, Florida 32202
(City/State and Zip Code)

For further information concerning this matter, please call:

Jenny Kalota at (904) 301-1269
(Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Contega Business Services, LLC
(Name of Registered Agent)

hereby resigns as Registered Agent for FINGERSHIELD SAFETY (USA) INC.
(Name of Corporation)

P04000035155

(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.

SRD as President
(Signature of Resigning Agent)

If signing on behalf of an entity:

G. Ray Driver, Jr.
(Typed or Printed Name)

President
(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**

FILED
SECRETARY GENERAL
DIVISION OF CORPORATIONS
11 MAY 18 PM 1:59