

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : SHUMAKER, LOOP & KENDRICK LLP  
Account Number : 075500004387  
Phone : (813)229-7600  
Fax Number : (813)229-1660

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: shcintz@carbiz.com

RECEIVED  
2010 FEB 10 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**REGISTERED AGENT RESIGNATION  
CARBIZ AUTO CREDIT, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$87.50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 FEB 10 AM 9:18

FILED

*RA Resign*

Electronic Filing Menu

Corporate Filing Menu

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Carbiz Auto Credit, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** P04000052299

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:

Michael H. Robbins

(Name of Person)

(Name of Firm/Company)

101 E. Kennedy Boulevard, Suite 2800

(Address)

Tampa, FL 33602

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael H. Robbins

(Name of Person)

at ( 813 ) 227.2230

(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

FILED  
10 FEB 10 AM 9:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Florida Statutes, the undersigned, Michael H. Robbins

(Name of Registered Agent)

hereby resigns as Registered Agent for Carbiz Auto Credit, Inc.

(Name of Corporation)

P04000052299

(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.

*Michael H. Rollin*  
(Signature of Resigning Agent)

(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**