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Division of Corporations

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Division of Corporations

Fax Number

: (850)617-6380

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From:

To:

Account Name : HILL WARD HENDERSON

Account Number: 072100000520 : (813)221-3900 Phone Fax Number : (813)221-2900

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

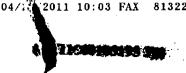
REGISTERED AGENT RESIGNATION UNIVERSITY SAVINGS ASSOCIATION INCORPORATED

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Electronic Filing Menu

Corporate Filing Menu

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provis	ions of sections 6	07.0502(2), 617.0502(2),	607,1509, or 617.15	509,		
Florida Statutes, the u	ndersigned. Th	omas N. Henderson, III	I			
		•	istered Agent)			
hereby resigns as Reg	stered Agent for	University Savings As	sociation Incorpor	ated	Ē.	
, <u>-</u>		(Name of C	orporation)		•	
P04456						
(Document Numb	er, if known)					
A copy of this resigna	tion was mailed to	o the above listed corpora	tion at its last know	n address.		
The agency is termina this statement is filed.	Flam	discontinued on the 31st	day after the date or	1 which		
	(Si	gnature of Resigning Agent)				
If signing on behalf of	an entity:					
	·	Typed or Printed Name) (Capacity)			11 APR 20 RM 3: L	
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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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

