## P06000031566

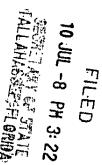
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: THE WELLMAN GRO	OUP, INC.
	(Name of Corporation)
DOCUMENT NUMBER: P0600	0031566
The enclosed Resignation of Register	red Agent for a Corporation and fee are submitted for filing.
Please return all correspondence con-	cerning this matter to the following:
REGINA WELLMAN	
(Name of Person	n)
THE WELLMAN GROUP, INC.	
(Name of Firm/Com	ipany)
6043 NW 167 St., Unit A-18	•
(Address)	
Miami FL 33015	
(City/State and Zip	Code)
For further information concerning th	nis matter, please call:
REGINA WELLMAN	at ( 305 ) 556-6011
(Name of Person)	at ( <u>305</u> ) <u>556-6011</u> (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to or \$35.00 for an administratively diss	the Florida Department of State for \$87.50 for an active corporation solved, voluntarily dissolved or withdrawn corporation.
Amendment Section Division of Corporations Clifton Building	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 60	07.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, AL	MA WELLMAN
	(Name of Registered Agent)
hereby resigns as Registered Agent for	THE WELLMAN GROUP, INC.
, , , , , , , , , , , , , , , , , , , ,	(Name of Corporation)
P06000031566	
(Document Number, if known)	·
-	o the above listed corporation at its last known address.  discontinued on the 31st day after the date on which
Alm Wes	Quature of Resigning Agent)
If signing on behalf of an entity:	ML-8 PM
(*	Typed or Printed Name)

## 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\$35.00 - Administratively dissolved/voluntarily dissolved/withdrawn corporation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

(Capacity)