P06000099678

	(Requ	iestor's Nam	ne)			
	(Addr	ess)				
•						
(Address)						
	(City/s	State/Zip/Ph	one #)			_
PICK-UF	•	WAIT		י 🔲	MAIL	
					ı	
	(Busir	ness Entity N	vame)			
		,	·		•	: :
	(Docu	ment Numb	er)			-
	•		·			:
Certified Copies		Certifica	ites of S	Status	•	:
						; ;
			•			
Special Instructions	to Fil	ing Officer:				
					•	
		·				
				,		

Office Use Only



800157356598

06/25/09--01026--030 **87.50

RA Resign

SECRETARY OF STATE OF CORPORATIONS DIVISION OF CORPORATIONS



Resignation of Registered Agent for a Corporation

Capitol Corporate Services, Inc.

PO Box 1831 Austin, TX 78767

Phone: 800-345-4647 Fax: 800-432-3622

regagent@capitolservices.com

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

DATE: STATE: 6/22/2009 FLORIDA

REP UNIT:

FIRSTATLANTIC FINANCIAL

HOLDINGS, INC.

Enclosed for filing please find a Resignation of Registered Agent for a Corporation for the above referenced name, which is to be filed in your office. Enclosed is check # 16431 in the amount of \$87.50 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call 800-345-4647 and ask for the Registered Agent Department.



COVER LETTER

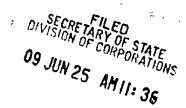
	t Corporations
SUBJECT:	FIRSTATLANTIC FINANCIAL HOLDINGS, INC. (Name of Corporation)
DOCUMENT NU	UMBER: <u>P06000099678</u>
The enclosed Resi	gnation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all co	orrespondence concerning this matter to the following:
	Rhonda Maybin (Name of Person)
Capi	tol Corporate Services, Inc. (Name of Firm/Company)
	800 Brazos, Suite 400 (Address)
	Austin, Texas 78701 (City/State and Zip Code)
For further inform	ation concerning this matter, please call:
Rho	ame of Person) at (800) 345-4647 (Area Code & Daytime Telephone Number)

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

TO:

Amendment Section



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, Capitol Corporate Services, Inc. (Name of Registered Agent)
hereby resigns as Registered Agent for FIRSTATLANTIC FINANCIAL HOLDINGS, INC., (Name of Corporation)
P06000099678
(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.
(Signature of Resigning Agent)
If signing on behalf of an entity:
Cheryl Roberts (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