P07000/19603

(Re	questor's Name)		-
(Ad	dress)		-
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(Cit	y/State/Zip/Phon	e #)	-
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Certified Copies	_ Certificate	s of Status	-
Special Instructions to	Filing Officer:		1
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: First American Investment Group INC (Name of Corporation)
DOCUMENT NUMBER: PO 7000/19603
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:
Timothy Johnston (Name of Person)
(Name of Person) First American Investment Group Inc (Name of Firm/Company)
(Name of Firm/Company)
$\frac{34760 \text{ US } 19 \text{ N}}{\text{(Address)}}$
(Address) Palm Harbor FZ 34684 (City/State and Zip Code)
For further information concerning this matter, please call:
Timoth Johnston at (727) 422-5505 (Name of Person) at (727) 422-5505

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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,
hereby resigns as Registered Agent for FIST AMERICAN Investment Coup, / Name of Corporation)
(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: Timothy Johnston Typed or Printed Name)
President English 22
(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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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