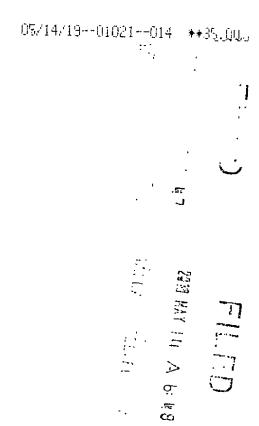
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(Re	questor's Name)	
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D SCOTT
JUN 3 2019

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Beach Haven Mortgage Holding, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P08000057835

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:

Corinne P. McClure, Senior Paralegal

(Name of Person)

McGuireWoods LLP

(Name of Firm/Company)

50 North Laura Street, Suite 3300

(Address)

Jacksonville, FL 32202

(City/State and Zip Code)

For further information concerning this matter, please call:

Corinne McClure

_{...},904 ,798-329

(Name of Person)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of sec	ctions 607.0502(2), 617.0502(2), 607.1	1509, or 617.15	09.
Florida Statutes, the undersigned	H. RAX Co. (Name of Registered		
	(Agent)		
hereby resigns as Registered Ag	_{ent for} Beach Haven Mortga	-	g, Inc.
	(Name of Corpora	tion)	
P08000057835			
(Document Number, if known	1)		
A copy of this resignation was n	nailed to the above listed corporation a	it its last knowr	ı address.
The agency is terminated and the this statement is filed.	e office discontinued on the 31st day a	fter the date on	which
- Sura	(Signatury of Resigning Agent)	<u>.</u>	23
	(Signature of Resigning Agent)		
If signing on behalf of an entity:		•	<u> </u>
			>
Lisa O. Ta	aylor		œ. 🔪
	(Typed or Printed Name)		57 60
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withdrawn corporation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