

Division of Corporations **Electronic Filing Cover Sheet**

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(((H14000273720 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : KOUTOULAS & RELIS, LLC

Account Number : I20070000005 Phone : (954)332-1345 Fax Number : (954)332-1346

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

Email Address:

REGISTERED AGENT RESIGNATION THE NMS GROUP, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$35.00 |

NOV 26 2014

T. CARTER

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COVER LETTER

| TO: Amendment Section Division of Corporations | |
|--|--|
| SUBJECT: The NMS Group, Inc. | |
| (Name of Corpora | tion) |
| DOCUMENT NUMBER: P09000004902 | |
| The enclosed Resignation of Registered Agent for a Corpor | ration and fee are submitted for filing. |
| Please return all correspondence concerning this matter to | the following: |
| Ursula Atkinson | |
| (Name of Person) | _ |
| Koutoulas & Relis, LLC | |
| (Name of Firm/Company) | - |
| 1776 N Pine Island Rd Ste 316 | |
| (Address) | |
| Plantation, FL 33322 | _ |
| (City/State and Zip Code) | |
| For further information concerning this matter, please call: | |
| Ursula Atkinson 954 | ,332-1345 |
| (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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3/3 FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

| Pursuant to the provisions of sections 607.0302(2), 617.0302(2), 607.1309, or 617.1309, |
|---|
| Florida Statutes, the undersigned, Koutoulas & Rells, LLC |
| (Name of Kelistere Vicini) |
| hereby resigns as Registered Agent for The NMS Group, Inc. |
| (Time of Corporation) |
| P0900004902 |
| (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: |
| Steven L Relis |
| (Typed or Printed Name) |
| Partner |
| (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