

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : SHUMAKER, LOOP & KENDRICK LLP
Account Number : 075500004387
Phone : (813) 229-7600
Fax Number : (813) 229-1660

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

Email Address: shcintz@carbiz.com

**REGISTERED AGENT RESIGNATION
CARBIZ AUTO CREDIT NE, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$87.50

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Corporate Filing Menu

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Handwritten signature and date 2-10-10

H16000030428 3**COVER LETTER****TO:** Amendment Section
Division of Corporations**SUBJECT:** Carbiz Auto Credit NE, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P09000012278

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:

Michael H. Robbins

(Name of Person)

(Name of Firm/Company)

101 E. Kennedy Boulevard, Suite 2800

(Address)

Tampa, FL 33602

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael H. Robbins

(Name of Person)

at (813) 227.2230

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314