Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: INCORPORATING SERVICES FL

Account Number: I20050000052 Phone

Fax Number

: (302)531-0855 : (850) 656-7953

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

Smail	Address:			

REGISTERED AGENT RESIGNATION CASH4POLICY, INCORPORATED

Certificate of Status	0
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Estimated Charge	\$87.50

Electronic Filing Menu

Corporate Filing Menu

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T. ROBERTS

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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: CASH4POLICY, INCORPORATED
	(Name of Corporation)
DOC	UMENT NUMBER: P09000052015
The er	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
EDIE	E WHITEBREAD
	(Name of Person)
INC	DRPORATING SERVICES, LTD.
	(Name of Firm/Company)
3500	S. DUPONT HWY.
	(Address)
DOV	'ER, DE 19901
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
EDIE	WHITEBREAD at (800) 346-4646
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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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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,	INCORPORATING SERVICES LTD.	2.4			
	(Name of Registered Agent)	5			
hereby resigns as Registered Agent	for CASH4POLICY, INCORPORATED	(94)			
	(Name of Corporation)	V MARS			
P09000052015		64			
. (Document Number, if known)					
A copy of this resignation was mail	ed to the above listed corporation at its last know	vn address.			
The agency is terminated and the of this statement is filed. If signing on behalf of an entity:	Configuration on the 31st day after the date of Configuration (Signature of Resigning Agent)	n which			
WANDA Y. BI	ANKENSHIP				
	(Typed or Printed Name)				
ASSISTANT S	SECRETARY				
	(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