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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Account Number : 076077001702 : (407)841-1200 Phone : (407)423-1831 Fax Number

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

Email Address: ____mfondle@downmead.com

REGISTERED AGENT RESIGNATION NORTEK ENTERPRISE, INC.

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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, DEAN MEAD SERVICES, LLC
(Name of Registered Agent)
hereby resigns as Registered Agent for NORTEK ENTERPRISE, INC.
(Name of Corporation)
P12000036009
(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. DEAN MEAD SERVICES, LLC
By: (Signature of Resigning Agant)
If signing on behalf of an entity:
Robert J. Naberhaus
(Typed or Printed Name)
Vice 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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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