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.

(((H230001262513)))



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To:

Division of Corporations

Fax Number ; (850)617-6380

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number : I20010000078

Phone : (407)843-8880

Fax Number : (407)244-5690

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

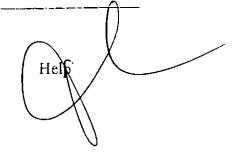
Email Address:_

REGISTERED AGENT RESIGNATION SGB CONSULTING HR, INC.

Certificate of Status	0
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Estimated Charge	\$87.50

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: SGB Consulting HR, Inc.	
(Name of Corporation)	
DOCUMENT NUMBER: P13000002353	
The enclosed Resignation of Registered Agent for a Corporation and fee are sub-	mitted for filing.
Please return all correspondence concerning this matter to the following:	
	M.
Suzanne Burrow	,
(Name of Person)	•
SGB Consulting HR, Inc.	1
(Name of Firm/Company)	·~.
6000 Marina Drive, Suite 108	: :
(Address)	
Holmes Beach, FL 34217	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Suzanne Burrow at (941) 807-1722 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60)7.0503(2), 617 0502(2), 607.1509, or 61	7.1509,
Florida Statutes, the undersigned, Mic	chael J. Canan	
	(Name of Registered Agent)	
nereby resigns as Registered Agent for _	SGB Consulting HR, Inc.	
	(Name of Corporation)	
P13000002353		
(Document Number, if known)	-	
A copy of this resignation was mailed to	the above listed corporation at its last kn	own address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date	e on which
	mature of Esigning Agent)	. 287
(51)	material of real grants of the same	
If signing on behalf of an entity:		I
		7
		₫:
(Typed or Printed Name)	: : : : : : : : : : : : : : : : : : :
		<u>:-</u>
		ယ
		_

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

(Capacity)