

P18349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

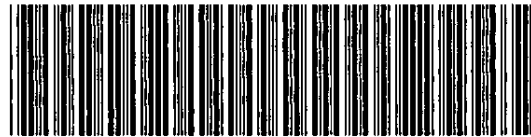
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200236594422

06/20/12--01014--006 **210.00

FILED

2012 JUN 20 A 11:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. LEMIEUX

JUN 21 2012

[Handwritten signature]

June 15, 2012

RE: AFS BROKERAGE, INC.	(CO. DOM.)
NATIONAL ASSISTANCE BUREAU, INC.	(IN. DOM.)
OMC LENDING, INC.	(OH. DOM.)
PAMPOLINA USA, INC.	(DE. DOM.)
PURE NUTRIENTS, INC.	(DE. DOM.)
TEXAS-SCARBOROUGH, INC.	(TX. DOM.)

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is 1 check in the amount of \$210.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (hm)

Theresa Alfieri
Senior Supervisor &
Assistant Secretary

TA/hm
Enclosure

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

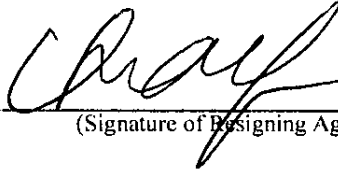
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, C T CORPORATION SYSTEM
(Name of Registered Agent)
hereby resigns as Registered Agent for NATIONAL ASSISTANCE BUREAU INC. (IN. DOM.)
(Name of Corporation)

P18349

(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:

C T CORPORATION SYSTEM - THERESA ALFIERI

(Typed or Printed Name)

ASSISTANT 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withdrawn corporation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**

2012 JUN 20 A 11: 50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

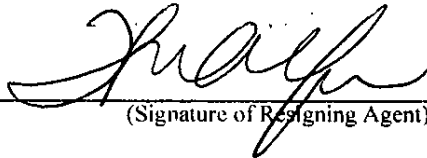
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, C T CORPORATION SYSTEM
(Name of Registered Agent)
hereby resigns as Registered Agent for NATIONAL ASSISTANCE BUREAU INC. (IN. DOM.)
(Name of Corporation)

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(Document Number, if known)

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