

P93000064334

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

600002581736--6
-07/07/98--01080--020
*****87.50 *****87.50

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. SUNSET FINANCIAL GROUP CORP.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Walk in Pick up time 2:00 Certified Copy
 Mail out Will wait Photocopy Certificate of Status

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

98 JUL -7 PM 3:17

FILED

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

1/8

Jon R.A. Resign

DIVISION OF CORPORATION

98 JUL -7 AM 11:25

RECEIVED

Examiner's Initials

Florida Department of State, Jim Smith, Secretary of State

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 JUL -7 PM 3:17

FILED

RESIGNATION OF REGISTERED AGENT

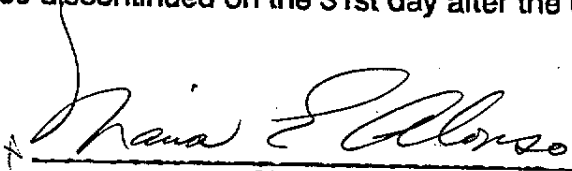
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or

617.1509, Florida Statutes, the undersigned, MARIA E. ALONSO
(name of registered agent)

hereby resigns as Registered Agent for SUNSET FINANCIAL GROUP CORP.
(name of corporation)

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

FEE FOR FILING THIS DOCUMENT:

\$87.50-Active Corporation

\$35.00-Administratively Dissolved Corporation

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

(12E046 (7-91))