

P94000044689

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

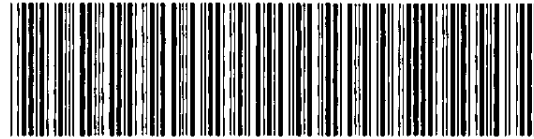
(Business Entity Name)

(Document Number)

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09 OCT 29 AM 11:01  
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DEPT. OF STATE  
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TALLAHASSEE, FLORIDA

R.A. Lesig  
C.COULLIETTE

OCT 29 2009

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 171486 7377485

AUTHORIZATION :

COST LIMIT : \$ PPD

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ORDER DATE : October 29, 2009

ORDER TIME : 9:58 AM

ORDER NO. : 171486-005

CUSTOMER NO: 7377485  
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CHANGE OF AGENT

NAME: NANOBACK PHARMACEUTICALS,  
INCORPORATED

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
DD \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER: \_\_\_\_\_

**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, William J. Schifino, Jr.

(Name of Registered Agent)

hereby resigns as Registered Agent for Nanobac Pharmaceuticals, Incorporated

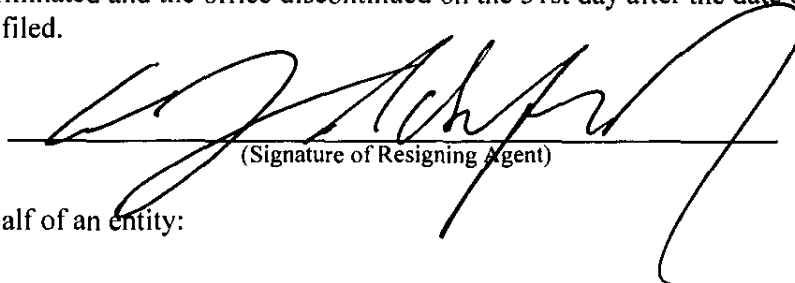
(Name of Corporation)

P94000044689

(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:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 OCT 29 AM 11:01

**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withdrawn corporation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