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(Re	equestor's Name)	
(Ad	dress)	
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(Ĉit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Alphastar Insurance Services Inc., f/k/a Stirling Cook Insurance Services (Name of Corporation)
DOCUMENT NUMBER: P95000043026
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kevin G. Fitzgerald (Name of Person)
Foley & Lardner LLP (Name of Firm/Company)
777 East Wisconsin Avenue (Address)
Milwaukee, WI 53202-5306 (City/State and Zip Code)
For further information concerning this matter, please call:
Kevin G. Fitzgerald at (414) 297-5841; (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 corporate

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

CR2E046(08/05)

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.	.0502(2), 617.0502(2), 607.1509, or 617.150	19,		
Florida Statutes, the undersigned,	F&L Corp			
, <u> </u>	(Name of Registered Agent)			
hereby resigns as Registered Agent for	Alphastar Insurance Services Inc.			
	(Name of Corporation)			
P95000043026				
(Document Number, if known)				
A copy of this resignation was mailed to the	he above listed corporation at its last known	addres	s.	
The agency is terminated and the office di statement is filed.	scontinued on the 31st day after the date on	which	this	
The .	I. Fo			
(Signa	nture of Resigning Agent)		05	
If signing on behalf of an entity:		A A	DEC	
		ASS N	-	Terrent
Kevi	in G. Fitzgerald	m-i	=	m
	(Typed or Printed Name)	EL S	ي	O
		ATE	52	
	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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