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(Re	questor's Name)	
(Ad	dress)	
bA)	dress)	
(Cit	y/State/Zip/Phon	e#)
PICK-UP		MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
	Office Use Or	5.64



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06 FEB -1 AN 9:09 FILED TARY OF ST

Office Use Only

January 26, 2006

1 m

RE: CRH ASSOCIATES, INC.

(FL. 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 \$35.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (il)

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA: il enclosure

FILED RESIGNATION OF REGISTERED AGENT⁶⁶ FEB -1 FOR A CORPORATION FOR A CORPORATION FOR A CORPORATION FALL AHASSEF FITATE

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 60	07.1509, or 617.1509; FLORINA
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	CRH ASSOCIATES, INC.	(FL. DOM.)
	(Name of Corporation)	

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(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 R gning 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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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