

Broad and Cassel

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Division of Corporations

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Florida Department of State
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : BROAD AND CASSEL (ORLANDO)
Account Number : T1998000090
Phone : (407) 839-4200
Fax Number : (407) 839-4264

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Kdickison@broadandcassel.com

REGISTERED AGENT RESIGNATION
WELLINGTON GENERAL CORP.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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1/14/2015

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Resign
1/14/2015

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Wellington General Corp.

(Name of Corporation)

DOCUMENT NUMBER: P98000084863

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:

Kristi Dickison, Paralegal

(Name of Person)

Broad and Cassel

(Name of Firm/Company)

390 N. Orange Ave, Suite 1400

(Address)

Orlando, Florida 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

Kristi Dickison

(Name of Person)

at 407 481-5263

(Area Code & Daytime Telephone Number)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Broad and Cassel

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**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, B&C Corporate Services of Central Florida
(Name of Registered Agent)

hereby resigns as Registered Agent for Wellington General Corp.
(Name of Corporation)

P98000084863

(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:

Kristi L. Dickison

(Typed or Printed Name)

Vice President

(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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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