(Rec	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	/State/Zip/Phone	2 #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

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10/07/05 -01020/-001 **3500.00

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Sol Holdings Inc. (Name of Corporation)
DOCUMENT NUMBER: S 77087
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:
Gisela Fasco (Name of Person)
Broad and Cassel
One Biscayne Tower 21st Floor
Broad and Casse (Name of Firm/Company) One Biscayne Tower, 21st Floor 2 South Biscayne Boulevard (Address)
Miami, FL 3313 1 (City/State and Zip Code)
For further information concerning this matter, please call:
Gisela Fasco at (30s) 373-9419 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

FILED

05 OCT -3 PM 1: 06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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, Inc. (Name of Registered Agent)
hereby resigns as Registered Agent for Schoolings, Inc.,
(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:
Gisela Fasco (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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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