

V411062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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CT CORPORATION

September 3, 2004

RE: STERLING HEALTHCARE GROUP, INC. (FL.DOM.)

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

Dear Sir or Madam:

We enclose resignations executed in duplicate, by the agent for service of process for the above corporation. 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 (tk)*

Theresa Alfieri

Senior Supervisor & Assistant Secretary  
TA/ik  
Enclosure

111 Eighth Avenue  
New York, NY 10011  
Tel. 212 894 8940  
Fax 212 590 9180

**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, C T CORPORATION SYSTEM

(Name of Registered Agent)

hereby resigns as Registered Agent for STERLING HEALTHCARE GROUP, INC.

(Name of Corporation)

V41062

(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:

C T CORPORATION SYSTEM - THERESA ALFIERI

(Typed or Printed Name)

ASSISTANT SECRETARY

(Capacity)

STATE DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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**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withdrawn corporation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**