CERTIFICATE OF RESIGNATION OF REGISTERED AGENT FOR

	(Corporati	ion)	
	(FOR USE BY REGISTERED AGENTS OF DOM	MESTIC OR FOREIGN	CORPORATIONS)
	To: New Jersey Department of the Treasury, Divis In accordance with the provisions of Section 1		ns, General, of the New
	rsey Statutes, I,		
	(No. and Street) e address of the registered office of the above-named co	(City and State)	(Zip Code)
	DO HE	REBY DECLARE tha	t:
	(Name of State)		
1.	I sent my resignation by certified mail, number		, recorded at the
	(Cert. Mail #)		
	Post Office with return (City and State of Post Office)	n receipt requested, to	(Name)
		ion known to me at th	
	being the last of said corporation known to me, at the last address known to me at (President, Vice-Pres., Sec. or Treas.)		
	(No. and Street)	(City and State)	(Zip Code)
	Certified mail was accepted by		not accepted
2.	Attached is a copy of my resignation mailed on		
3.	Service of notice of my resignation has not been made	as required. Such serv	rice cannot be made because:
4.	It is understood that my resignation shall become efferof this certificate in the Office of the Treasurer or upon registered agent, whichever is earlier. Beginning with its authorization for the Treasurer to accept service of A.2A:15-30 until the corporation files a certificate set.	on the designation by the the effective date of n process under N. J. S.	the corporation of a new my resignation, this certificate 2A:15- 26 through N.J. S.
	(Signature of Agent		(Date)

NOTE: Pursuant to NJSA 14A:4-3 and NJSA 14A:4-3(4), failure to file a Certificate of Change of Registered Agent or Office or both may result in a penalty imposed by the State Attorney General.

Instructions for Form C-104E CERTIFICATION OF RESIGNATION OF REGISTERED AGENT CORPORATIONS (Titles 14A and 15A)

STATUTORY FEE: \$25.00

The MANDATORY review fields are:

Business Name

List the corporation name as it appears on the records of the Treasurer.

Agent Name and Office

List the registered agent name and office as they appear on the records of the Treasurer.

Declaration of Mailings

Add a statement that indicates that copies of the resignation were sent via certified mail, return receipt requested to the last-known president or vice-president **and** last-known treasurer or secretary. Include the following information for **each mailing**: certified mail number; post office form which mailing was done; mailing address; and indication of whether the mailing was accepted or not, and if accepted, by whom. If the mailing was not accepted by any party, provide an explanation. Form 104E provides all of the necessary blanks and statements for these filing requirements.

Date That Resignation Was Mailed

List the mailing date.

ATTESTATIONS

Add a statement indicating:

- 1) an understanding that the resignation is effective 30 days after filing of the change form with the Division of Revenue, or upon the designation of a new agent/office by the affected corporation, whichever is earlier; and
- 2) that the Treasurer is the agent for service of process until a new agent is designated. Form 104E provides the requisite language.

ATTACHMENTS

Attach a copy of the resignation.

EXECUTION

The resigning agent must sign. Also, list the date of execution (signature).

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These documents should be filed in duplicate. Non-profits should file in triplicate. Make checks payable to: TREASURER, STATE Of NEW JERSEY. (No cash, please)

Mail to: NJ Division of Revenue, PO Box 308, Trenton, NJ 08646