

NO 00000725

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

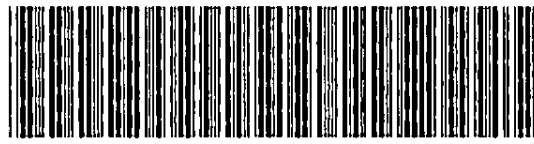
(Business Entity Name)

(Document Number)

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SEP 25 2018

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SECRETARY OF STATE
TALLAHASSEE, FL

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations
RE: Flagler County Free Clinic, Inc.

**DOCUMENT
NUMBER:** N06000007252

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Ms. Peggy Hengvold, Pres.
Flagler County Free Clinic, Inc.
PO BOX 863
BUNNELL, FL 32110

For further information concerning this matter, please call John Incorvaia, Esq. (386) 246-8550

Enclosed is a \$35.00 check made payable to the Department of State.

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

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

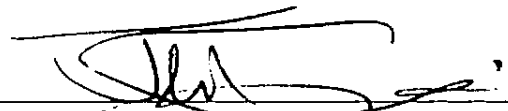
CR2E045

**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, John Incorvaia, Esq., hereby resigns as Registered Agent for Flagler County Free Clinic, Inc., Document Number N06000007252.

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)

9/20/2018

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

FILED
2018 SEP 24 AM 8:34
SECRETARY OF STATE
TALLAHASSEE, FL

Make checks payable to Florida Department of State and mail to:

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