P11000099482

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Decum ant Number)
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVED AND FILFO

C. LEWIS

OCT 1 0 2013

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: WARMMAXX COMPANY
(Name of Corporation)
DOCUMENT NUMBER: P11000099482
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:
Clemens W. Pauly
(Name of Person)
Pauly P.A.
(Name of Firm/Company)
815 Ponce de Leon Blvd., Ste P-209
(Address)
Coral Gables, FL 33134
(City/State and Zip Code)
For further information concerning this matter, please call:
Clemens Pauly 305 648-3909

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

(Area Code & Daytime Telephone Number)

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

(Name of Person)

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

TO:

Amendment Section

APPROVEB AND FILED

13 OCT -4 AM 10: 37 SECRETARY OF STATE TALLAHASSEE, FLORIDA

RESIGNATION OF REGISTERED AGENT' FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1	509,
Florida Statutes, the undersigned, Clemens W. Pauly	
(Name of Registered Agent)	
hereby resigns as Registered Agent for Warmmaxx Company (Name of Corporation)	
(Name of Corporation)	
P11000099482	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last know	vn address.
The agency is terminated and the office discontinued on the 31st day after the date of this statement is filed.	on which
(Signature of Resigning Agent)	
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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314