

## Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

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## To:

Division of Corporations  
Fax Number : (850)617-6380

## From:

Account Name : CARLTON FIELDS  
Account Number : 076077000355  
Phone : (813)223-7000  
Fax Number : (813)229-4133

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: \_\_\_\_\_

**REGISTERED AGENT RESIGNATION  
OCHAB PROPERTIES INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, CF REGISTERED AGENT, INC.

(Name of Registered Agent)

hereby resigns as Registered Agent for OCHAB PROPERTIES INC.

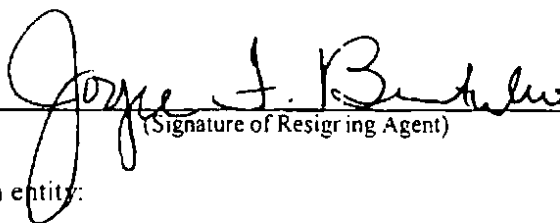
(Name of Corporation)

P12000006761

(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:

JOYCE F. BENT JBO

(Typed or Printed Name)

DIRECTOR/SECRETARY

(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withdrawn corporation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

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2021 FEB -2 AM 10:57  
STATE  
TALLAHASSEE, FL  
FILED