378910

(Req	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates of Status	
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Special Instructions to F	uling Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SIGNAL SYSTEMS, INC.
(Name of Corporation) DOCUMENT NUMBER: 378910
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:
n/a
(Name of Person)
n/a
(Name of Firm/Company)
n/a
(Address)
n/a
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at () (Area Code & Daytime Telephone Number)
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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

	ions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the ur	ndersigned. Don L.Copeland Jr.,	
	(Name of Registered Agent)	
hereby resigns as Regi	stered Agent for SIGNAL SYSTEMS, INC.	
	(Name of Corporation)	
378910		
(Document Numb	er, if known)	
A copy of this resignat	tion was mailed to the above listed corporation at its last known address.	9
The agency is terminat this statement is filed.	ted and the office discontinued on the 31st day after the date on which colors and the office discontinued on the 31st day after the date on which colors are the date on the date of the date on the date of	FILED
	(Signature of Resigning Agent)	, (
If signing on behalf of	an entity:	平 10: 33
	n/a	
	(Typed or Printed Name)	
	n/a	
	(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Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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