

581265

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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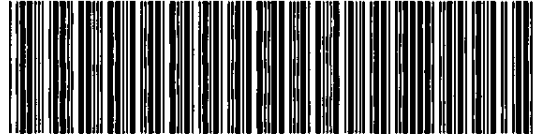
(Business Entity Name)

(Document Number)

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*Resignation
to RA*

03/26/14--01009--012 **87.50

FILED
2014 MAR 26 PM 1:50
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

*DR
3/27/14*

537 Acacia Avenue
Melbourne Village, FL 32904

March 14, 2014

Florida Door Control of Orlando, Inc.
658-2 Washburn Road
Melbourne, FL 32934

To Whom It May Concern:

Please consider this letter as my resignation as Registered Agent with the State of Florida for Florida Door Control of Orlando, Inc. as of this date.

Thank you.

Sincerely,


Robert M. Harpold

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Florida Door Control of Orlando, Inc.
(Name of Corporation)

DOCUMENT NUMBER: 581265

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:

Glenn Harpold
(Name of Person)

Florida Door Control of Orlando, Inc
(Name of Firm/Company)

658-2 Washburn Road
(Address)

Melbourne, FL 32934
(City/State and Zip Code)

For further information concerning this matter, please call:

Glenn Harpold at (321) 254-8011 X25
(Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

FILED

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

2014 MAR 26 PM 1:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Robert M. Harpold
(Name of Registered Agent)

hereby resigns as Registered Agent for Florida Door Control of Orlando, Inc.
(Name of Corporation)

581265

(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.

Robert M. Harpold
(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**