## 622496

|                      | (Requestor's Name)       |                                       |  |
|----------------------|--------------------------|---------------------------------------|--|
| (                    | (Address)                |                                       |  |
| (                    | (Address)                | ·                                     |  |
|                      | (City/State/Zip/Phone #) |                                       |  |
| PICK-UP              | WAIT                     | MAIL                                  |  |
| (                    | (Business Entity Name)   | · · · · · · · · · · · · · · · · · · · |  |
| (Document Number)    |                          |                                       |  |
|                      | Certificates of \$       | Status                                |  |
| Special Instructions | to Filing Officer:       |                                       |  |
| ·                    |                          |                                       |  |

Office Use Only



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2015 OCT 27 AM II: 34 SECRETARY OF STATE.

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## **COVER LETTER**

TO: Amendment Section Division of Corporations Fleet Lease Disposal, Inc (Name of Corporation) DOCUMENT NUMBER: 622496 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: **Gary Mott** (Name of Person) Fleet Lease Disposal, Inc (Name of Firm/Company) 1515 N Congress Ave Ste A (Address) Delray Beach, FL 33445 (City/State and Zip Code) For further information concerning this matter, please call: Gary Mott Area Code & Daytime Telephone Number) (Name of Person)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

tter Circle Tallahassee, FL 32314

## 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, Laurie Conn  |             |             |
| (Name of Registered Agent)  |             |             |
| hereby resigns as Registered Agent for Fleet Lease Disposal, Inc  |             |             |
| (Name of Corporation)   |             |             |
| 622496  |             |             |
| (Document Number, if known)   |             |             |
| A copy of this resignation was mailed to the above listed corporation at its last known a                         | ddress.     |             |
| The agency is terminated and the office discontinued on the 31st day after the date on w this statement is filed. | hich        |             |
| Laue L  |             |             |
| (Signature of Resigning Agent)  |             |             |
| If signing on behalf of an entity:  |             |             |
| Laurie Conn EEGR  | 2015 OCT 27 | <b>-</b> 71 |
| (Typed or Printed Name)   | CT 2:       |             |
| Secretary   |             | П           |
| (Capacity)  | AM II: 31   | U           |

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