

Florida Debartment of State Division of Corporations Degranio Fifing Cover Sheet

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REGISTERED AGENT RESIGNATION FRASES & FRASES INSURANCE AGENCY INC.

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Help

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

1	ns of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the und	ersigned, TOMAS LAMAS
ł	(Name of Registered Alem)
hereby resigns as Registe	ered Agent for FRASES & FRASES INSURANCE AGENCY INC.
	(Name of Corporation)
634018	·
(Document Number,	if known)
A copy of this resignatio	on was mailed to the above listed corporation at its last known address.
The agency is terminated	d and the office discontinued on the 31st day after the date on which
this statement is filed.	
If signing on behalf of a	(Signature of Resigning Agent) Tomas Camas mentity:
	(Typed or Printed Name)
	(Capacity)
	(Capacity) Fee for filling this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/withdrawn corporation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
Tallabassee, FL 32314

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