

704101

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

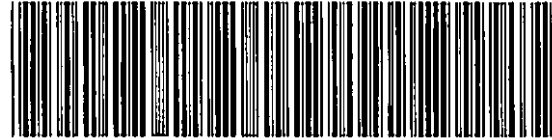
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100301344891

07/18/17--01004--002 **87.50

FILED
STATE
CLERK OF SUPERIOR COURT
JUL 17 2017
17 JUL 17 AM 10:39

Ra Resignation

JUL 20 2017

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: La Marietta, Inc.

(Name of Corporation)

DOCUMENT NUMBER: 704101

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:

(Name of Person)

Allied Property Management Group, Inc.

(Name of Firm/Company)

1711 Worthington Rd., Suite 103

(Address)

West Palm Beach, FL 33409

(City/State and Zip Code)

For further information concerning this matter, please call:

Kenneth S. Direktor

at (954) 987-7550

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

RECEIVED
OFFICE OF THE
ATTORNEY GENERAL
JAN 17 1968

**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, Becker & Poliakoff, P.A.

(Name of Registered Agent)

hereby resigns as Registered Agent for La Marietta, Inc.

(Name of Corporation)

704101

(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:

(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

47 JUL 17 10:10 AM
STATE OF FLORIDA
DIVISION OF CORPORATIONS

Kenneth S. Direktor, Esq.
Shareholder
Phone: (954) 965-5050 Fax: (954) 985-4176
kdirektor@bplegal.com

1 East Broward Blvd., Suite 1800
Ft. Lauderdale, Florida 33301

July 12, 2017

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**Re: La Marietta, Inc.
Document No. 704101**

Dear Sir or Madam:

Enclosed please find an executed Resignation of Registered Agent Form for the above referenced corporation along with a check in the amount of \$87.50 to cover the cost of filing.

Should you have any questions or comments whatsoever, please contact the undersigned.

Very truly yours,



Kenneth S. Direktor
For the Firm

KSD/tw
Enclosures

ACTIVE: 9926938_1