

707921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

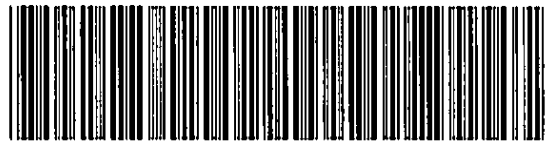
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200345286102

06/08/20--01030--023 *61.50
RECEIVED
JUN 8 2020

2020 JUN -8 AM 8:36

FILED

RA/RES

JUN 22 2020

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Temple Baptist Church of Lee County, Inc.

(Name of Corporation)

DOCUMENT NUMBER: 707921

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:

Joshua O. Dorcsey

(Name of Person)

The Dorcsey Law Firm, PLC

(Name of Firm/Company)

10181 Ben C Pratt/ Six Mile Cypress Pkwy, Suite C

(Address)

Fort Myers, Florida 33966

(City/State and Zip Code)

For further information concerning this matter, please call:

Joshua O. Dorcsey

(Name of Person)

239

418-0169

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, John Edwards

(Name of Registered Agent)

hereby resigns as Registered Agent for Temple Baptist Church of Lee County, Inc.

(Name of Corporation)

707921

(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.

DocuSigned by:

John Edwards

5668A11CD743487

(Signature of Resigning Agent)

If signing on behalf of an entity:

John Edwards

(Typed or Printed Name)

President

(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