Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 ; (850)205-8842

Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

REGISTERED AGENT RESIGNATION RED CARPET CORPORATION OF AMERICA

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Help

COVER LETTER

TO: Amendment Section Division of Corpora	ntions
SUBJECT: RED CAP	RPET CORPORATION OF AMERICA
DOCUMENT NUMBER:	(Name of Corporation) 827884
The enclosed Resignation o	of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspond	lence concerning this matter to the following:
Theresa Alfieri	
	e of Person)
C T CORPORA	ATION SYSTEM
(Name of	Firm/Company)
111 8th Avenue	e, 13th Floor
; (A	Address)
New York, New	v York 10011
(City/State	e and Zip Code)
For further information cond	cerning this matter, please call:
Theresa Alfieri	at (212)894-8516 (Area Code & Daytime Telephone Number)
(Name of Per	son) (Area Code & Daytime Telephone Number)

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0	502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, CTCORPORAT	TION SYSTEM
(Nam	ne of Registered Agent)
hereby resigns as Registered Agent for RED CARPET	CORPORATION OF AMERICA
827884 827884 (N	lame of Corporation)
(Document tanimet, it allows)	
A copy of this resignation was mailed to the above listed. The agency is terminated and the office discontinued on this statement is filed.	
and smooth is filed.	
I hail	
(Signatur of Resigning	Agent)
If signing on behalf of an entity:	
CT CORPORATION SYSTE	
(Typed or Printed Nan	ne) EB
ASSISTANT SECRETARY	င်ဂိုးမွဲ့ 🚫 🗟
(Capacity)	그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
	<u>54 </u>

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/

Fee for filing this document: \$87.50 - Active Corporation