

828335  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:  
Division of Corporations  
Fax Number : (850)617-6380

From:  
Account Name : INCORP SERVICES INC  
Account Number : I20120000007  
Phone : (702)866-2500  
Fax Number : (702)900-2290

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

Email Address: documents@incorp.com

2022 AUG 31 PM 9:12  
CLERK OF STATE  
TALLAHASSEE, FL

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**REGISTERED AGENT RESIGNATION  
MISSISSIPPI MANAGEMENT, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$87.50

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MISSISSIPPI MANAGEMENT, INC.

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MISSISSIPPI MANAGEMENT, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** 828335

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:

Karen Gibson  
(Name of Person)

InCorp Services, Inc.  
(Name of Firm/Company)

3773 Howard Hughes Parkway, Suite 500S  
(Address)

Las Vegas, NV 89169-6014  
(City/State and Zip Code)

For further information concerning this matter, please call:

Karen Gibson for InCorp Services, Inc. at ( 702 ) 866-2500  
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

**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

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TALLAHASSEE, FL

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**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, InCorp Services, Inc.

(Name of Registered Agent)

hereby resigns as Registered Agent for MISSISSIPPI MANAGEMENT, INC.

(Name of Corporation)

828335

(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.

InCorp Services, Inc.



(Signature of Resigning Agent)

If signing on behalf of an entity:

Karen Gibson

(Typed or Printed Name)

Authorized Representative on behalf of InCorp Services, Inc.

(Capacity)

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SECRETARY OF STATE  
TALLAHASSEE, FL

**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**

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