## F04000000 691

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJI	ECT: WPC, INC.	
	(Name of Corporation)	
DOCU	JMENT NUMBER: F04000000691	
The en	closed Resignation of Registered Agent for a Corporation and fee are submitted for fi	ling.
Please	return all correspondence concerning this matter to the following:	
Jame	es Hank Johnson	
	(Name of Person)	
WPC	, INC.	
	(Name of Firm/Company)	
1017	CHUCK DAWLEY BLVD	
	(Address)	
MT.	PLEASANT, SC 29464	
	(City/State and Zip Code)	
For fur	ther information concerning this matter, please call:	
COLL	EEN MCDOWELL at ( 843 ) 884-1234	
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

## 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, Donovan Ledford
(Name of Registered Agent)
hereby resigns as Registered Agent for Wright, Padgett, Christopher, Inc.  (Name of Corporation)
F0400000691
(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filing this document: \$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ASSEFFLOR withdrawn corporation  FILED
Make checks payable to Florida Department of State and mail to:

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