F05 00000 4615

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	:#)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations
POGGI BROTHERS USA, INC. SUBJECT:
(Name of Corporation)
DOCUMENT NUMBER: F05000004615
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:
Nina Tarowsky
(Name of Person)
United Corporate Services, Inc.
(Name of Firm/Company)
10 Bank St. Ste. 560
(Address)
White Plains, NY 10606
(City/State and Zip Code)
For further information concerning this matter, please call:
at () (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

	e provisions of sections 607.0503(2), 617.0502(2), 607.1509, or	617.1509,	
Florida Statut	es, the undersigned, United Croporate Services, Inc.		
	(Name of Registered Agent)		
hereby recions	s as Registered Agent for POGGI BROTHERS USA. INC.		
nereby resign.	(Name of Corporation)		
F05000004615			
(Docum	nent Number, if known)		
A copy of this	resignation was mailed to the above listed corporation at its last	t known address.	
The agency is this statement	terminated and the office discontinued on the 31st day after the is filed.	date on which	
	(Signature of Resigning Agent)		
It signing on behalf of an entity:		2020 0	
	Michael A. Barr	<i>ī.</i>	
	(Typed or Printed Name)		
		-D	
	President, On the Corporate Services, Inc. (Capacity)		
	(Capacity)	ယ္အ	

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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