Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name : INCORPORATING SERVICES FL

Account Number : 120050000052 Phone : (302)531-0855 Fax Number : (850)656-7953

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

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REGISTERED AGENT RESIGNATION CHARTER LAND TITLE AGENCY, INC.

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06-14-1

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COVER LETTER

SUBJECT: CHARTER LAND TITL	E AGENCY, INC.	
SUBJECT:	(Name of Corporation)	
DOCUMENT NUMBER: F06000	002413	
The enclosed Resignation of Registere	ed Agent for a Corporation and fee are submitted for fi	ing.
Please return all correspondence conce	erning this matter to the following:	
TUNISHA SCOTT		
(Name of Person))	
INCORPORATING SERVICES, L	.TD.	
(Name of Firm/Comp	pany)	
3500 S. DUPONT HIGHWAY		
(Address)		
DOVER, DE 19901		
(City/State and Zip C	ode)	
For further information concerning thi	s matter, please call:	
TUNISHA SCOTT	at (302) 531-0855	
(Name of Person)	at (302) 531-0855 (Area Code & Daytime Telephone Number)	

or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	507.0502(2), 617.0502(2), 607.1509, or 617.1	509,
Florida Statutes, the undersigned, INCORPORATING SERVICES, LTD.		
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	CHARTER LAND TITLE AGENCY, INC	 ,
	(Name of Corporation)	
F06000002413		
(Document Number, if known)		
A copy of this resignation was mailed t	to the above listed corporation at its last know	vn address.
this statement is filed.	e discontinued on the 31st day after the date of discontinued on the 31st day after the 31	m which
If signing on behalf of an entity:		
Candice B. Swetl	and	_m s
	(Typed or Printed Name)	
		≥ ≥ ≥
Assistant Secrete	ry	JUN 14 CRETAR AHASS
	(Capacity)	~ 4 ~< 1
		AM IO:
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Fee for filin	ng this document:	DA W
\$87.50 - Ac	tive corporation	i intra Fa

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/