

F100000004557

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

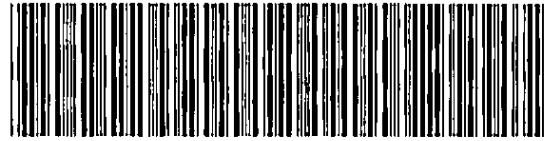
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500315593265

07/12/18--01:12--007 **35.00

18 JUL 12 PM 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

JUL 13 2018
S. YOUNG

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NATURAL SELECTIONS DBA HOTEL FLOORS
(Name of Corporation)

DOCUMENT NUMBER: F10000004557

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:

ELIZABETH MARTIN
(Name of Person)

NATURAL SELECTION
(Name of Firm/Company)

1036 MICHAEL RD
(Address)

MONROE GA 30656
(City/State and Zip Code)

For further information concerning this matter, please call:

ELIZABETH MARTIN at (770) 807 9245
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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**

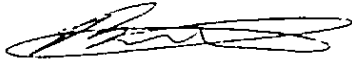
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, InCorp Services, Inc.
(Name of Registered Agent)

hereby resigns as Registered Agent for Hotel Floors
(Name of Corporation)

F10000004557
(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:

Brittney Winder

(Typed or Printed Name)

Authorized Representative

(Capacity)

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18 JUL 12 PM 3:35