# F11000000 327

(	Requestor's Name)	
<del> </del>	Address)	
	Address)	
(	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	
(	Document Number)	
Certified Copies	. Certificates of	Status
Special Instructions to F	Filing Officer:	

Office Use Only



200414578032

THED

2023 SEP -6 AM II: 29

ANTENNASSEE: FLORID

RECEIVED
2023 SEP-6 AM 10: 36
PALLANASSFY PRATIONS

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	120000000	195
	RÉFERENCE	:	959361	8323810
	AUTHORIZATION	:	1	$\mathcal{N}_{\mathcal{A}}$
	COST LIMIT	:	\$ 877.50	Kenan
ORDER DATE : A	August 28, 2023			
ORDER TIME :	9:29 AM			
ORDER NO. : 9	59361-025			
CUSTOMER NO:	8323810			
	· <del></del>		<b></b>	
	CHANGE OF A	GENT	<u>.</u>	
NAME:	CBC RESTAURAN'			
PLEASE RETURN T	THE FOLLOWING AS	PRO	OF OF FIL	ING:
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON:	Eyliena Baker		EXT#	

EXAMINER:

### **COVER LETTER**

TO: Amendment Section Division of Corporations	
CBC Restaurant Corp. SUBJECT:	
(Name of Corporat	ion)
DOCUMENT NUMBER: F11000000327	
The enclosed Resignation of Registered Agent for a Corpor	ation and fee are submitted for filing.
Please return all correspondence concerning this matter to t	he following:
RESIGNATION DEPARTMENT	
(Name of Person)	-
CORPORATION SERVICE COMPANY	
(Name of Firm/Company)	-
251 LITTLE FALLS DRIVE	
(Address)	-
WILMINGTON, DE 19808	
(City/State and Zip Code)	-
For further information concerning this matter, please call:	
RESIGNATION DEPARTMENT 800 at (	927-9801
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 959361 8323810
AUTHORIZATION CAMELS Se Man
COST LIMIT \$\int\{8\)87.50
ORDER DATE : August 28, 2023
ORDER TIME : 9:29 AM
ORDER NO. : 959361-025
CUSTOMER NO: 8323810
CHANGE OF AGENT
NAME: CBC RESTAURANT CORP. LIQUIDATING, INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY
CONTACT PERSON: Eyliena Baker EXT#
EXAMINER:



September 7, 2023

CSC

SUBJECT: CBC RESTAURANT CORP.

Ref. Number: F11000000327

resubmit

Please give original submission date as file date.

We have received your document for CBC RESTAURANT CORP. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Name of the Corporation must match DOS records.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

Letter Number: 923A00020538



# RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of secti	ons 607.0503(2), 617.0502(2), 607.1509, or 61	7.1509.		
Florida Statutes, the undersigned.	CORPORATION SERVICE COMPANY			
	(Name of Registered Agent)			
hereby resigns as Registered Ager	CBC Restaurant Corp.			
neredy resigns as registered reger	(Name of Corporation)			
F11000000327				
(Document Number, if known)				
A copy of this resignation was ma	iled to the above listed corporation at its last kn	own ad	dress.	
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the date	e on wh	ich	
	Eylina Baher Assistant Vice Provident			
	(Signature of Resigning Agent)	≱:	202	
If signing on behalf of an entity:		LAHA!	2023 SEP -	7
BY EYLIENA BAI	KER	SSEE	9-	
	(Typed or Printed Name)	- <u> </u>	A	!T
VICE PRESIDENT		FLORIDA	AM II: 29	<b>'</b> س

## 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

(Capacity)