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(Re	equestor's Name)	
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(Ci	ty/State/Zip/Phone	
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(Bı	usiness Entity Nan	ne)
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Office Use Only



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JAN 23 2019 S. YOUNG 19 JAN 15 AH 8:09

## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJ	JECT: CWC ENTERPRISES, INC.	
DOC	(Name of Corporation)  CUMENT NUMBER: F12000002481	
The e	enclosed Resignation of Registered Agent for a Corporation	and fee are submitted for filing.
Pleas	se return all correspondence concerning this matter to the fo	lowing:
Ме	eaghan Gwinn	
	(Name of Person)	
Reg	gistered Agents Legal Services, LLC	
	(Name of Firm/Company)	
10	13 Centre Road Suite 403S	
	(Address)	
Wil	ilmington, DE 19805	
-	(City/State and Zip Code)	
For fu	further information concerning this matter, please call:	
Me	eaghan Gwinn at (800 Area Code & Do	0-6650
	(Name of Person) (Area Code & Da	iytime Telephone Number)
121	and in a death and an about the Ulanda Dancetment of	tata for \$97.50 for an active con

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 section	ons 607.0502(2), 617.0502(2), 607.1509, or 617	
Florida Statutes, the undersigned,	REGISTERED AGENTS LEGAL SERVICE	ES, LLC
•	(Name of Registered Agent)	
hereby resigns as Registered Agen	CWC ENTERPRISES,	INC.
neredy resigns as registered rigen	(Name of Corporation)	<del></del>
F12000002481		
(Document Number, if known)	<del></del>	
A copy of this resignation was ma	iled to the above listed corporation at its last known	own address.
The agency is terminated and the cather this statement is filed.	office discontinued on the 31st day after the date	e on which
JOU	(Signature of Resigning Agent)	
If signing on behalf of an entity:		19 1311
	(Typed or Printed Name)	JAN 15
Arth	Mizel Person	# See

## 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)