

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

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\*\*Entor the email address for this business entity to be used for future annual report mailings. Enter only one email address ploase. \*\*

## REGISTERED AGENT RESIGNATION LOWER LOWNDES, INC.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 0.2     |
| Estimated Charge      | \$87.50 |

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Corporate Filing Menu

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2/2/2015

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**COVER LETTER** 

| TO: Amendment Section Division of Corporations  |  |  |
|---|--|--|
| SURJECT: Lower Lowndes, Inc.  |  |  |
| (Name of Corporation)  DOCUMENT NUMBER: F12000003601  |  |  |
| 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:   |  |  |
| Kristi Dickison   |  |  |
| (Name of Person)  |  |  |
| Broad and Cassel  |  |  |
| (Name of Firm/Company)  |  |  |
| 390 N. Orange Avenue, Ste 1400  |  |  |
| (Address)   |  |  |
| Orlando, Florida 32801  |  |  |
| (City/State and Zip Code)   |  |  |
| For further information concerning this matter, please call:  |  |  |
| Kristi Dickison at (407 ) 481-5263 (Area Code & Daytime Telephone Number)   |  |  |
| (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 Corporations Post Office Box 6327 Tallahassee, FL 32314 |  |  |

Broad and Cassel

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## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

| Pursuant to the provisions of section | ons 607.0502(2), 617.0502(2), 607.1509, or 617.1509,            |
|---------------------------------------|---|
| Florida Statutes, the undersigned,    | B&C Corporate Services of Central Florida, Inc.                 |
|                                       | (Name of Registered Agent)                                      |
| hereby resigns as Registered Agen     | Lower Lowndes, Inc.   |
|                                       | (Nume of Corporation)   |
| F12000003601                          |   |
| (Document Number, if known)           | <del></del>   |
| A copy of this resignation was mai    | iled 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.

If signing on behalf of an entity:

Kristi Dickison (Typed or Printed Name)

Vice President

(Capacity)

Fee for filing this document:

\$87.50 - Active Corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallabassee, FL 32314