F13 CCCCC 11CO

(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



600335294336

10/09/19--01018--015 ++85.00



OCT 28 MIRSEN

COVER LETTER

Division of Corporations
SUBJECT: ALPHANEST HOLDING CORP.
(Name of Corporation)
DOCUMENT NUMBER: F13000001100
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:
Registered Agent Department
(Name of Person)
Business Filings Incorporated (Name of Firm/Company)
8020 Excelsior Drive Suite 200 (Address)
Madison, WI 53717 (City/State and Zip Code)
For further information concerning this matter, please call:
Brenna Lutter (Name of Person) at (608) 827-7622 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 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, Business Filings Incorporated		
(Name of Registered Agent)		
hereby resigns as Registered Agent for ALPHANEST HOLDING CO)RP.	
(Name of Corporation)		
F13000001100		
(Document Number, if known)		
A copy of this resignation was mailed to the above listed corporation at its last kno	own address.	
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	on which	
Brennachtutter	2 0	
(Signature of Resigning Agent)	119 ₁	
If signing on behalf of an entity:	2019 OCT -9	ij.
	<u>ئ</u> و	
Brenna Lutter	T-9 AMII:02	J
		تەن مىبىي
Г		
Asst Secretary for Business Filings Incorporated	. 0	
(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Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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