F1400001300

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	Office Use Only



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S. YOUNG

COVER LETTER

то:	Amendment Section Division of Corporations
SUBJ	ECT: AIRBIOTICS, INC.
	(Name of Corporation)
DOC	UMENT NUMBER: F14000001300
The er	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filin
Please	return all correspondence concerning this matter to the following:
Kryst	al Beckner
	(Name of Person)
COG	ENCY GLOBAL INC.
	(Name of Firm/Company)
850 N	New Burton Rd., Suite 201
	(Address)
Dove	er, DE 19904
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Invoi	ces Team at (866) 621-3524
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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

withdrawn corporation