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DEC 2 0 2018 , PLORIDA S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SCHLETTER INC.
(Name of Corporation)
DOCUMENT NUMBER: F15000000348
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:
RESIGNATION DEPARTMENT
(Name of Person)
CORPORATION SERVICE COMPANY
(Name of Firm/Company)
80 STATE STREET
(Address)
ALBANY NY 12207
(City/State and Zip Code)
For further information concerning this matter, please call:
ROBIN MOLT (Name of Person) at (518) 433-7018 (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 corpora

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Fursiant to the provisions of sections $607.0502(2)$, $617.0502(2)$, 607.1509 , or $617.0502(2)$	1509,
Florida Statutes, the undersigned, CORPORATION SERVICE COMPAN	ΙΥ
(Name of Registered Agent)	
hereby resigns as Registered Agent for SCHLETTER INC.	
(Name of Corporation)	
F1500000348	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last know	vn address.
The agency is terminated and the office discontinued on the 31st day after the date of this statement is filed.	on which
(Signature of Resigning Agent)	18 DE
If signing on behalf of an entity:	ESSE C 17
ROBIN MOLT	THE O
(Typed or Printed Name)	AH 0: 08
ASST SECRETARY	
(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Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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