F15000003397

(Reque	estor's Name)	
(Addre	ss)	
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(City/S	tate/Zip/Phone :	#)
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APR 17 2020 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: CORNERSTONE CONTRACTING, INC. (Name of Corporation) DOCUMENT NUMBER: F15000003397 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: Kristie Tolliver (Name of Person) COGENCY GLOBAL INC. (Name of Firm/Company) 850 New Burton Rd., Suite 201 (Address) Dover, DE 19904 (City/State and Zip Code) For further information concerning this matter, please call: Invoices Team at (866)621-3524 (Area Code & Daytime Telephone Number) (Name of Person) 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 Mailing Address: Amendment Section Division of Corporations Division of Corporations Post Office Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the	e provisions of sections 607.0502(2), 617.0502(2), 607.1509, 6	or 617.1509.
Florida Statute	es, the undersigned. COGENCY GLOBAL INC.	
	(Name of Registered Agent)
hereby recione	as Registered Agent for CORNERSTONE CONTRA	ACTING, INC.
nereoy resigns	(Name of Corporation)	
F150000	03397	
	ent Number, if known)	
A copy of this	resignation was mailed to the above listed corporation at its la	ist known address.
The agency is this statement	terminated and the office discontinued on the 31st day after this filed.	e date on which
	Kristie Tolliver (Signature of Resigning Agent)	2020
If signing on b	ehalf of an entity:	2020 APR -
	Kristie Tolliver	3 AR
	(Typed or Printed Name)	و الشر
	Assistant Secretary, COGENCY GLOBAL INC.	. ~

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withdrawn corporation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)