F16000003751

		_
(Re	questor's Name)	
(Ad	dress)	_
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
,2-	,	,
·= (Do	cument Number)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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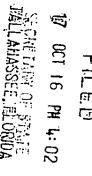
Office Use Only



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OCT 1 8 2017 S. YOUNG



COVER LETTER

ECT: Central Adjustment Comp	any, Inc.
(Name of Corporat	ion)
	•
MENT NUMBER: F16000003751	
closed Resignation of Registered Agent for a Corpor	ation and fee are submitted for filing.
return all correspondence concerning this matter to t	he following:
helle S.	
(Name of Person)	-
LS	
(Name of Firm/Company)	-
3 Centre Road, Suite 403S	
(Address)	•
mington, DE 19805 (City/State and Zip Code)	-
ther information concerning this matter, please call:	
helle S. (Name of Person) at (Area Code)	400-6650 & Daytime Telephone Number)
	(Name of Person) S (Name of Firm/Company) 3 Centre Road, Suite 403S (Address) mington, DE 19805 (City/State and Zip Code) ther information concerning this matter, please call: helle S. at (800)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 section	ns 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned.	Registered Agents Legal Services, LLC
•	(Name of Registered Agent)
hereby resigns as Registered Agent	Central Adjustment Company, Inc.
	(Name of Corporation)
F16000003751	
(Document Number, if known)	
A copy of this resignation was mail	ed to the above listed corporation at its last known address.
The agency is terminated and the of this statement is filed.	ffice discontinued on the 31st day after the date on which
Donk	(Signature of Resigning Agent)
If signing on behalf of an entity:	
Denise A. F	Owler (Typed or Printed Name)
	(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