F23000001762

(Requestor's Name)
(Address)
(Address)
· · · ·
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:

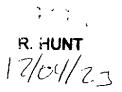
Office Use Only



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DIVISION OF CORFORATIONS
2023 DEC.—1. PM 12.1.0





Resignation of Registered Agent for a Corporation

Capitol Corporate Services, Inc.

PO Box 1831 Austin, TX 78767

Phone. (800) 345-4647 Fax (800) 432-3622

regagent@capitolservices.com

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 DATE: STATE: 11/28/2023 FLORIDA

REP UNIT:

THE JERRY D. GUESS

PHILANTHROPIC FOUNDATION,

NC.

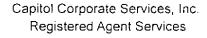
Enclosed for filing please find a Resignation of Registered Agent for a Corporation for the above referenced name, which is to be filed in your office. Enclosed is check # 33667 in the amount of \$87.50 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call (800) 345-4647 and ask for the Registered Agent Department.

Please return file-stamped copy to the following address:

Capitol Corporate Services, Inc. PO Box 1831 Austin, TX 78767

2020 DEC -4 PH 12: 4C

SECRETARY OF STATE DIVISION OF CURPORATIONS





RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	507.0503(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, Cap	pitol Corporate Services, Inc.	
hereby resigns as Registered Agent for	(Name of Registered Agent)	
THE JERRY D. GUESS PHILAN	NTHROPIC FOUNDATION, INC.	
	(Name of Corporation)	
F23000001762		
(Document Number, if known)		
A copy of this resignation was mailed t	to the above listed corporation at its last known address.	
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day after the date on which	
	CC	
lis	ignature of Resigning Agent)	
If signing on behalf of an entity:		
	202	E
	Yvette Cleveland	ISI SEC
	Yvette Cleveland (Typed or Printed Name) Tuped or Printed Name)	25. 25.
	+	- 44.45 - 67.75
	Assistant Secretary	- 성유 상유로
-	(Capacity)	780 18
	<u></u>	- 5±

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