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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Allegheny Design Management, Inc.

(Name of Corporation)

DOCUMENT NUMBER: F93000000268

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:

RESIGNATION DEPARTMENT

, 518- \433-7018

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.	1509,
Florida Statutes, the undersigned, CORPORATION SERVICE COMPAN	۱Y
(Name of Registered Agent)	
hereby resigns as Registered Agent for Allegheny Design Management, In	nc.
(Name of Corporation)	<del></del>
F9300000268	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known	wn address.
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	on which
(Signature of Resigning Agent)	2019
If signing on behalf of an entity:	2019 (15) - 4
BY ROBIN MOLT	PH 12:
(Typed or Printed Name)	i N
	<u>-</u> 5
ASST SECRETARY	
(Capacity)	

## Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation