

**F95000002182**

**Florida Department of State  
Division of Corporations  
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**\*RE-SUBMIT\***

To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 878-5368

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**REGISTERED AGENT RESIGNATION  
ATLANTIC CITY COIN & SLOT SERVICE COMPANY, INC.**

Certificate of Status	0
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Attn: Carolyn Lewis

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JUL 27 2016

C LEWIS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ATLANTIC CITY COIN & SLOT SERVICE COMPANY, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** F95000002182

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:

**Helen Mac-Tran**

(Name of Person)

**NATIONAL REGISTERED AGENTS, INC.**

(Name of Firm/Company)

**111 8th Avenue, 13th Floor**

(Address)

**New York, NY 10011**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Helen Mac-Tran**

(Name of Person)

at **(212) 590-9118**

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

2016 JUL 20 AM 9:55

**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, NRAI SERVICES, INC.

(Name of Registered Agent)

hereby resigns as Registered Agent for ATLANTIC CITY COIN & SLOT SERVICE COMPANY, INC.

(Name of Corporation)

F95000002182

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which  
this statement is filed.



(Signature of Resigning Agent)

If signing on behalf of an entity:

NRAI SERVICES, INC.-Helen Mac-Tran

(Typed or Printed Name)

ASSISTANT 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