F98000000 a531 THEODORE LaPIER 730 Crescent Hills Lakeland, Florida 33813

(863) 709-0284

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

COM OMITTOTALIAMENTO CONTRACTOR C	<u> </u>	· , .
1(Corporation Name)	(Document #)	SFCR F
2		HASS
(Corporation Name)	(Document #)	AM 9:
(Corporation Name)	(Document #)	ਹੁੰਦਾ ਨੂੰ
4(Corporation Name)	(Document #)	and the second s
☐ Walk in ☐ Pick up time	·	Certified Copy
☐ Mail out ☐ Will wait	Photocopy	Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	5000036181852 -01/31/0101074010 ****857.50 *****87.50
 □ Profit □ Not for Profit □ Limited Liability □ Domestication □ Other 	Amendment Resignation of R.A. Change of Registere Dissolution/Withdra Merger	ed Agent
OTHER FILINGS	REGISTRATION/QUA	ALIFICATION &
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other	ALIFICATION &
		Examiner's Initials

CR2E031(7/97)

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, THEODORE LaPIER (Name of registered agent)
hereby resigns as Registered Agent for WINGATE LAND CORPORATION (Name of corporation)
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. Compared the continued on the 31st day after the date on which this statement is filed.
If signing on behalf of an entity:
(Typed or Printed Name)
(Capacity)

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314