

(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	<del>)</del> #)
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(Bu	siness Entity Nan	ne)
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Ra Risignation NOV 29 2016

## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: Mercedes Ho	mes, Inc.		
DOCUMENT NUMBER: H8475	(Name of Corporati	ion)	
The enclosed Resignation of Registe		ation and fee are submitted for	filing.
Please return all correspondence con	cerning this matter to th	he following:	
Anne Herstol			
(Name of Perso	on)	-	
Prince CPA Group		_	
(Name of Firm/Cor	npany)		
9161 Narcoossee R	load Ste 202	-	
(Address)			
Orlando, FL 32827 (City/State and Zip	Codo	-	
For further information concerning t	ŕ	ų:	pe 4
Anne Herstol	•	823-8230	en s
(Name of Person)	at (Area Code	823-8230 Daytime Telephone Number)	表別 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Enclosed is a check made payable to or \$35.00 for an administratively dis	the Florida Departmen	t of State for \$87.50 for an act	tive corporation
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Mailing Address: Amendment Section Division of Corporation Post Office Box 6327 Tallahassee, FL 32314		Test

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ns 607.0502(2), 617.0502(2), 607.1509, or 617.1	509,
Florida Statutes, the undersigned, \(\frac{1}{2}\)	Keith Buescher	
	(Name of Registered Agent)	<del></del>
handa a si a sa Dariatana di Aranta	for Mercedes Homes, Inc.	
nereby resigns as Registered Agent	(Name of Corporation)	
H84754	• •	
(Document Number, if known)	<del></del>	
A copy of this resignation was maile	ed to the above listed corporation at its last know	n address.
The agency is terminated and the of	fice discontinued on the 31st day after the date of	n which
this statement is filed.		
Keich Bu	(Signature of Resigning Agent)	
If signing on behalf of an entity:		
Keith	Buescher (Typed or Printed Name)	
	*	20 1
	(Capacity)	NOV 21
Fee for f	iling this document:	

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

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/

\$87.50 - Active Corporation