# J12987

(Requesto	r's Name)
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PICK-UP	WAIT MAIL
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(Business	Entity Name)
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Certified Copies	Certificates of Status
Special Instructions to Filing C	Officer:
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PHILIP F. BONUS, ESQUIRE

#### 1115 EAST CONCORD STREET ORLANDO, FLORIDA 32803

TELEPHONE No.: (407) 835-8811 FACSIMILE No.: (407) 835-8868

Writer's email: pfb@bonuslaw.com

February 4, 2020

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Hot Dog Heaven of Orlando, Inc.

J12987

Our File No.: 6302-1

Dear Sir or Madam:

Regarding the above-referenced entity, enclosed for filing please find:

- 1. Resignation of Registered Agent for a Corporation and a check to Division of Corporations for \$87.50 (check no. 7174).
- 2. Officer/Director Resignation for a Corporation (Michael H. Feld) a check to Division of Corporations for \$35.00 (check no. 7175).
- 3. Officer/Director Resignation for a Corporation (Beth A. Feld) a check to Division of Corporations for \$35.00 (check no. 7176).
- 4. Change of Registered Agent form and a check to Division of Corporations for \$35.00 (check no. 7177).

5. Articles of Amendment and a check to Division of Corporations for \$35.00 (check no. 7178).

Very tryly/yours

Philip F. Bonus

PFB/gir Enclosures

cc: Michael & Beth Feld (via email)

### **COVER LETTER**

TO:	Amendment Section Division of Corporations
SHRI	HOT DOG HEAVEN OF ORLANDO, INC. ECT:
.,()1)3	(Name of Corporation)
DOC	UMENT NUMBER: 112987
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
JARE	TTE COWDEN
	(Name of Person)
нот	DOG HEAVEN OF ORLANDO, INC.
	(Name of Firm/Company)
5355 E	EAST COLONIAL DRIVE
	(Address)
ORLA	NDO, FLORIDA 32807
	(City/State and Zip Code)
For fi	orther information concerning this matter, please call:
JARE	TT COWDEN 407 600-7712
	(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of State for \$87,50 for an active corporation or \$35,00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

#### **Mailing Address:**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

# RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ons 607,0503(2), 617.0502(2), 607.1509, or 617.1509.	
Florida Statutes, the undersigned,	MICHAEL H. FELD	
To rida matates, me underingned	(Name of Registered Agent)	
hereby resigns as Registered Agen	HOT DOG HEAVEN OF ORLANDO, INC.	
The total temperature of the second s	(Name of Corporation)	
J12987		
(Document Number, if known)	<del></del>	
A copy of this resignation was mai	iled to the above listed corporation at its last known address.	
The agency is terminated and the control this statement is filed.	(Signature of Resigning Agent)	7
If signing on behalf of an entity:	OF S. T.	7
N/A		
	(Typed or Printed Name)	
<del></del>	(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