K80346

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COVER LETTER

TO: Amendment Section Division of Corporations
Tour-Rific Tours Inc SUBJECT:
(Name of Corporation)
DOCUMENT NUMBER: k80348
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:
Richard Milian
(Name of Person)
(Name of Firm/Company)
390 N orange Ave
(Address)
Orlando, Fl 32804
(City/State and Zip Code)
For further information concerning this matter, please call:
Ricahrd Milian 407 669-4223 at ()
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 secti	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	Richard N. Milian
· · · · · · · · · · · · · · · · · · ·	(Name of Registered Agent)
hereby resigns as Registered Agen	Tour-Rific Tours, Inc
	(Name of Corporation)
k80348	
(Document Number, if known)	
A copy of this resignation was ma	iled to the above listed corporation at its last known address.
The agency is terminated and the other this statement is filed.	office discontinued on the 31st day after the date on which
If signing on behalf of an entity:	(Signature of Resigning Agent)
Richard N. Milian	
	(Typed or Printed Name)
Attorney	
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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