K89165

(ке	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
,	,	
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: AMEK HOMES, INC.	
(Name of Corporation) DOCUMENT NUMBER: K89165	
The enclosed Resignation of Registered Agent for a Corporation and fe	e are submitted for filing.
Please return all correspondence concerning this matter to the following	5 :
Karen Loraine	
(Name of Person)	
GrayRobinson, P.A.	
(Name of Firm/Company)	
1795 W. Nasa Blvd.	
(Address)	
Melbourne, FL 32901	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Michelle Deering at (Area Code & Daytime)	-8100
(Name of Person) (Area Code & Daytime	relephone Number)
Enclosed is a check made payable to the Florida Department of State for \$35.00 for an administratively dissolved, voluntarily dissolved or with	

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60	7.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	Detriels Healts
Tiorida Stateties, tile difference,	(Name of Registered Agent)
hereby resigns as Registered Agent for _	AMEK HOMES, INC.
moreofy (6516)13 as reagistered regain for _	(Name of Corporation)
K89165	
(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 of this statement is filed.	discontinued on the 31st day after the date on which
Q.1	tu) 1/-
(Sig	nature of Resigning Agent)
If signing on behalf of an entity:	
Parca	Typed or Printed Name)
Т)	Typed or Printed Name)
P.,,,	(Capacity)
	(Сараску)

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withdrawn corporation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