

L22318

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Resignation
to RA

01/08/13--01014--007 **87.50

FILED
2013 JAN -8 AM 11:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100R
1/11/13

WALLACK LAW FIRM

MICHAEL M. WALLACK
ATTORNEY

3280 FRUITVILLE ROAD, SUITE A
SARASOTA, FLORIDA 34237

Telephone (941) 954-1280
Fax (941) 556-0521
Email: MMW@WallackLawFL.com

LETTER OF TRANSMITTAL

January 7, 2013

Amendments Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Third Coast Corporation

ENCLOSURES:

1. Check in the amount of: \$87.50 – (Fee for Resignation of Registered Agent for a Corporation)
2. Resignation of Registered Agent for a Corporation form

<input type="checkbox"/> For Your Information	<input type="checkbox"/> For Your Files
<input type="checkbox"/> For Your Signature and Return	<input type="checkbox"/> For Execution in presence of Notary Public
<input type="checkbox"/> Signature and Forwarding as noted under Remarks	<input type="checkbox"/> For Execution in presence of Notary Public and two (2) witnesses
<input type="checkbox"/> For Review and Comment	(X) For Payment
(X) For Necessary Action	<input type="checkbox"/> For Publication
<input type="checkbox"/> Per Your Request	<input type="checkbox"/> For Remittance
<input type="checkbox"/> Per Our Conversation	(X) See Remarks Below

REMARKS: Please don't hesitate to contact our office if you have any questions.

Very truly yours,

Elaina Margenthaler,

/emm

Encl.: As Stated.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: THIRD COAST CORPORATION
(Name of Corporation)

DOCUMENT NUMBER: L22318

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:

Michael M. Wallack, Esq.

(Name of Person)

Wallack Law Firm

(Name of Firm/Company)

3260 Fruitville Road, Suite A

(Address)

Sarasota, FL 34237

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael M. Wallack at (941) 954-1260

(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.

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**

FILED

2013 JAN -8 AM 11:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Michael M. Wallack

(Name of Registered Agent)

hereby resigns as Registered Agent for Third Coast Corporation

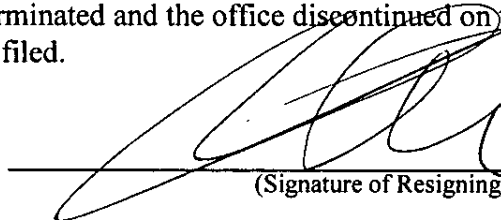
(Name of Corporation)

L22318

(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 discontinued on the 31st day after the date on which
this statement is filed.


(Signature of Resigning Agent)

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/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