

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1(Corporation Name)	(Document #)
2	
(Corporation Name)	(Document #)  1000031448912 -02/23/0001080011
3. (Corporation Name)	(Document #) ***********************************
4. (Corporation Name)	(Document #)
☐ Walk in ☐ Pick up tim	e Certified Copy
☐ Mail out ☐ Will wait	Photocopy Certificate of States
NEW FILINGS	AMENDMENTS HASSE
Profit Not for Profit Limited Liability Domestication Other	Amendment  Resignation of R.A., Officer/Director  Change of Registered Agent  Dissolution/Withdrawal  Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
☐ Annual Report ☐ Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other

**Examiner's Initials** 

## RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections	607.0502(2), 617.0502(2), 607.1509, or 617.1	1509,
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM (Name of registered agent)	
hereby resigns as Registered Agent fo	Name of corporation)	MPANY (FL. DOM.)
The agency is terminated and the offithis statement is filed.	d to the above listed corporation at its last known as, Inc. The Highlands 910 Ridgebrook Figure Mark Fulchino ice discontinued on the 31st day after the date of the discontinued of resigning agent)	on address.  On FEB 25 PH 12:  SEURETARY OF STA
If signing on behalf of an entity:	T CORPORATION SYSTEM  (Typed or Printed Name)	D 2:25 ORIDE
ASS	SISTANT SECRETARY	7 (A. 选)
<del></del>	(Capacity)	

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

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