Nood	204397
(Requestor's Name) (Address)	800251251568
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL	09/16/1301054007 **87.50
(Business Entity Name) (Document Number)	FILED 13 SEP 16 AM II: 22 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Special Instructions to Filing Officer:	· · ·
Office Use Only	C. LEWIS SEP 2 3 2013 EXAMINER

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COVER LETTER

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TO: Amendment Section Division of Corporations

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SUBJECT: Name of Corporation 2 L DOCUMENT NUMBER:

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:

(Name of Person)

(Name of Firm/Company)

City/State and Zip Code)

For further information concerning this matter, please call:

at $(\underbrace{8(3)}_{(\text{Area Code & Daytime Telephone Number}})$ (Name of Person)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 2061 Executive Center Circle Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENTFILED FOR A CORPORATION
13 SEP 16 AMII: 22
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607. J209 , OF ASTREE FLORIDA Florida Statutes, the undersigned,
hereby resigns as Registered Agent for Operation Love atteach, The (Name of Corporation)
NOOO0004397 (Document Number, if known)
Λ 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.
If signing on behalf of an entity:
Pacific White (Typed or Printed Name)
Ponistered Acont

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Fee for filing this document:

 \$87.50 - Active Corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

(Capacity)

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