

NOB00000006090

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300431829523

RECEIVED
JUL 15 AM 8:45
CLERK OF STATE
TALLAHASSEE, FL

RECEIVED
2024 JUL 16 PM 2:09
TALLAHASSEE, FLORIDA

R. PLANT

07/16/24

FLORIDA FILING & SEARCH SERVICES, INC.

**P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395**

DATE: 07/16/2024

NAME: AWC - FLORIDA III, INC

TYPE OF FILING: RESIGNATION OF RA

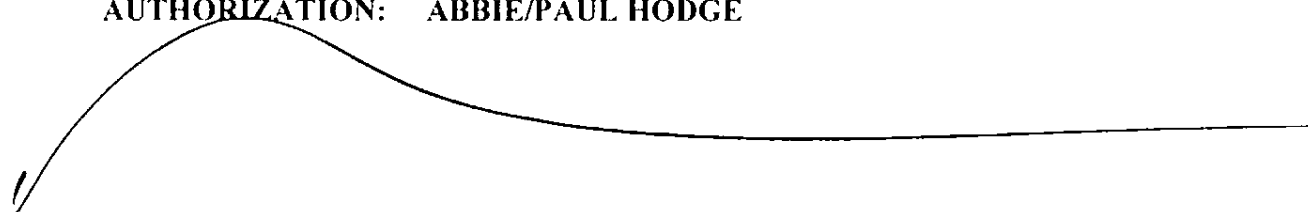
COST: 35.00

RETURN: PLAIN COPY PLEASE

FILED
JUL 16 AM 8:45
CLERK OF STATE
TALLAHASSEE, FL

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, W. Terry Costolo

(Name of Registered Agent)

hereby resigns as Registered Agent for AWC-Florida III, Inc.

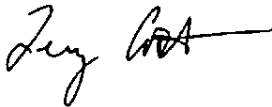
(Name of Corporation)

N00000006090

(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)

FILED
JUN 15 AM 8:45
TALLAHASSEE, FL

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withdrawn corporation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