1403000010702

(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
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SEVÄHÄSSEE, FLORIDA

COVER LETTER

Division of Corporations	
SUBJECT: European American Heritage Foundation Inc.	
(Name of Corporation)	
DOCUMENT NUMBER: N03000010702	
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:	
Mary Jo Spalinger	
(Name of Person)	
Business Filings Incorporated	
(Name of Firm/Company)	
8025 Excelsior Drive #200 (Address)	٠.
(Audicos)	
Madison, WI 53717	
(City/State and Zip Code)	•
For further information concerning this matter, please call:	
same at (608) 827-5300 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

TO:

Amendment Section

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Business Filings Incorporated (Name of Registered Agent)
` ' '
hereby resigns as Registered Agent for European American Heritage Foundation Inc.
(Name of Corporation)
N03000010702
(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.
Mary b Spalinger (Signature of Resigning Agent)
If signing on behalf of an entity:
Mary Jo Spalinger - Business Filings Incorporated
Mary Jo Spalinger - Business Filings Incorporated ASS 8 (Typed or Printed Name)
Assistant Secretary (Constitution of the constitution of the cons
(Capacity)
Fee for filing this document:

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

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/

\$87.50 - Active corporation