

N110000006560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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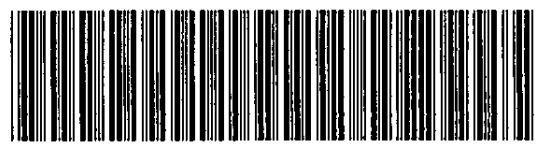
(Business Entity Name)

(Document Number)

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03/24/17--01019--018 \*\*25.00

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2017 APR 07 PM 1:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R+R/Res

APR 10 2017

ALBRITTON

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: JOHN O'BRIEN  
ERCOUPE FOUR CORP.  
(Name of Corporation)

DOCUMENT NUMBER: N/11000006560

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:

JOHN O'BRIEN  
(Name of Person)

ERCOUPE FOUR CORP.  
(Name of Firm/Company)

10062-84 WAY N.  
(Address)

SEMINOLE, FL 33777  
(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES SIEBERT at ( 727 ) 641-6634  
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 28, 2017

JAMES SIEBERT  
ERCOUPE FOUR CORPORATION  
10062 84TH LN  
SEMINOLE, FL 33777

SUBJECT: ERCOUPE FOUR CORPORATION  
Ref. Number: N11000006560

We have received your document for ERCOUPE FOUR CORPORATION and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The form you submitted is for a Limited Liability Company, but your entity is a Florida Non-Profit Corporation. Please complete and return the enclosed blank form(s).

The fee to resign as registered agent of an active corporation is \$87.50.

There is a balance due of \$62.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 117A00005897

RECEIVED  
17 APR -7 PM 1:42  
DIVISION OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**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, JOHN O'BRIEN  
(Name of Registered Agent)

hereby resigns as Registered Agent for EXCOURT FOUR CORP.  
(Name of Corporation)

N11000006560  
(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.

John O'Brien  
(Signature of Resigning Agent)

If signing on behalf of an entity:

JOHN O'BRIEN  
(Typed or Printed Name)

DIRECTOR  
(Capacity)

**FILED**  
2017 APR 07 PM 1:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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