N11000007825

- (Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only

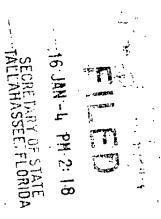


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resignation 06 RA

01/04/16--01011--020 **87.50

JAN 07 2016 A RAMSEY



JAN 07 2016 A RAMSEY

COVER LETTER

SUBJECT: (Name	e of Corpora	ation)
DOCUMENT NUMBER: N11000007825	-	
The enclosed Resignation of Registered Agent f	or a Corpo	ration and fee are submitted for filing
Please return all correspondence concerning this	s matter to	the following:
Fortune Henrich		
(Name of Person)		
ROICH		
(Name of Firm/Company)		
5500 Westview Drive		
(Address)		_
Orlando, FL 32810		
(City/State and Zip Code)		_
For further information concerning this matter,	please call:	
Fortune Henrich Or Solange Thibaut	_. 321	948-6572 le & Daytime Telephone Number)
(Name of Person)	(Area Coo	le & Daytime Telephone Number)

on or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION 16 JAN -4 PM 2: 18

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607A1309Hat 6FL 1509RIDA
Florida Statutes, the undersigned, Solange Thibaut (Name of Registered Agent)
Roanoke Velley Organization for Improvement of Haitian Community Corp.
hereby resigns as Registered Agent for
(Name of Corporation)
N1100007825
(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)

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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