

N12000008431

Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 617 6380

From:  
Account Name : INCORP SERVICES INC  
Account Number : 1201200000007  
Phone : (702) 866 2500  
Fax Number : (702) 866-2689

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: wendy.hefley@incorp.com

**REGISTERED AGENT RESIGNATION  
CHURCH EXPERIENCE, INC.**

Certificate of Status	0
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AUG 07 2020

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CHURCH EXPERIENCE, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** N12000008431

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:

Wendy Hefley  
(Name of Person)

Incorp Services, Inc.  
(Name of Firm/Company)

3773 Howard Hughes Parkway, Suite 500S  
(Address)

Las Vegas, NV 89169-6014  
(City/State and Zip Code)

For further information concerning this matter, please call:

Wendy Hefley for Incorp Services, Inc. at ( 702 ) 866-2500 ext 6904  
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

20 AUG -6 PM 11:45  
RECEIVED  
FLORIDA DEPT OF STATE  
DIVISION OF CORPORATIONS

## 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, Incorp Services, Inc.

(Name of Registered Agent)

CHURCH EXPERIENCE, INC.

hereby resigns as Registered Agent for

(Name of Corporation)

N12000008431

(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.

InCorp Services, Inc.

(Signature of Resigning Agent)

If signing on behalf of an entity:

Wendy Heflev

(Typed or Printed Name)

Authorized Representative on behalf of Incorp Services, Inc.

(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

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CORPORATIONS  
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