Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000240794 3)))



H230002407943ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

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

Email	Address:		

REGISTERED AGENT RESIGNATION SOUTHEAST FLORIDA CHAPTER OF THE NATIONAL **ASSOCIATIO**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu



H23000240794 3

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisi	ions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the ur	ndersigned. Registered Agent Solutions, Inc.
	(Name of Registered Agent)
hereby resigns as Regi	stered Agent for
	(Name of Corporation)
N16000000736	
(Document Numb	er. if known)
A copy of this resignat	tion was mailed to the above listed corporation at its last known address.
The agency is terminat this statement is filed.	ted and the office discontinued on the 31st day after the date on which
	Machine
	(Signature of Resigning Agent)
If signing on behalf of	an entity:
Mack	enzie Hibler
	(Typed or Printed Name)
Assist	ant Secretary, Registered Agent Solutions, 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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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