N16000010502

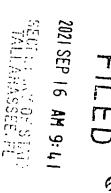
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	Honey Hill Congregation of Jehovah's Witnesses, Carol City JECT:	, Florida, Inc.
	(Name of Corporation)
DOC	CUMENT NUMBER: N16000010502	
The e	enclosed Resignation of Registered Agent for a Corporation	on and fee are submitted for filing.
Please	se return all correspondence concerning this matter to the	following:
Ronni	ie S. Navarro	
	(Name of Person)	
Honey	ey Hill Congregation of Jehovah's Witnesses, Carol City, FL, Inc.	
	(Name of Firm/Company)	
18201	1 NW 68th Avenue	
	(Address)	
Miam	ni. FL 33015-3404	
	(City/State and Zip Code)	
For fu	further information concerning this matter, please call:	
Ronni	at (08-5338
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	607.0503(2), 617.0502(2), 607	.1509, or 617.1509.
Florida Statutes, the undersigned, George	rge Spence	
Tronda diadies, the time signed.	(Name of Registere	ed Agent)
hereby resigns as Registered Agent for	Honey Hill Congregation of Jehova	th's Witnesses, Carol City, FL.
neredy resigns as registered regent for	(Name of Corpo	ration)
N16000010502		
(Document Number, if known)		
A copy of this resignation was mailed t	to the above listed corporation	at its last known address.
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day	after the date on which
Georg	e Sperce ignature of Resigning Agent)	08/31/2021
(S	ignature of Resigning Agent)	
If signing on behalf of an entity:		
		2021 SEC 1A
	(Typed or Printed Name)	FILED 2021 SEP 16 AM 9: 4 SECTOR SEE FE
	(Capacity)	—————————————————————————————————————
		*
Fee for filir	ng this document:	_

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

\$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