N1800000 1614

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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HALL S BUT CORPORATION OF CORPORATION



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Rays of Grace Inc.

(Name of Corporation)

DOCUMENT NUMBER: N18000001614

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:

Chelsea Haire

(Name of Person)

Legalinc Corporate Services, Inc.

(Name of Firm/Company)

10601 Clarence Drive, Suite 250

(Address)

Frisco, TX 75033

(City/State and Zip Code)

For further information concerning this matter, please call:

Chelsea Chapman at (844) 386-0178 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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, Legalinc Corporate Services, Inc.		
(Name of Registered Agent)		
hereby resigns as Registered Agent for Rays of Grace Inc.		
(Name of Corporation)		
N18000001614		
(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)	2	¥
If signing on behalf of an entity:	2020 MAR -	VOISE.
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(Typed or Printed Name)	D X	강 광주(
on Behalf of Legalinc Corporate Services, Inc.	: 5	

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)