N2000 000 4641

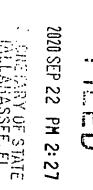
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COVER LETTER

	Amendment Section Division of Corporations	
SUBJE	MAVENS OF NOCATEE, INCORPORATED	
20B1E	(Name of Corporation)	 ,
DOCU	JMENT NUMBER: N20000004641	
The enc	nclosed Resignation of Registered Agent for a Corporation and fee	are submitted for filing.
Please r	return all correspondence concerning this matter to the following:	
SUSAN	N EDELL	
	(Name of Person)	
MAVEN	ENS OF NOCATEE, INCORPORATED	
	(Name of Firm/Company)	
130 COR	DRRIDOR RD, #961	
	(Address)	
PONTE	E VEDRA, FL 32004	
	(City/State and Zip Code)	
For furt	orther information concerning this matter, please call:	
SUSAN	N EDELL at (706 394-7477) (Name of Person) (Area Code & Daytime Te	Janhana Numbari
	(Area Code & Daytime To	repnone 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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	s 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, N	MAUREEN LOVAGLIO
	(Name of Registered Agent)
hereby resigns as Registered Agent fo	MAVENS OF NOCATEE, INCORPORATED
neredy resigns as Registered Agent to	(Name of Corporation)
N20000004641	
(Document Number, if known)	
A copy of this resignation was mailed	d to the above listed corporation at its last known address.
The agency is terminated and the offithis statement is filed.	ice discontinued on the 31st day after the date on which
Men	reer Lavadio
• • • • • • • • • • • • • • • • • • • •	(Signature of Resigning Agent)
If signing on behalf of an entity:	\mathcal{O}
	(Typed or Printed Name)
	(Typed of Fillined Wallie)
	(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\$35.00 - Administratively dissolved/voluntarily dissolved/withdrawn corporation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