N21000005362

(Requestor's Name)
(Address)
(Address)
(Audiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Degument Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
operating additions to 1 ming officer.
lunilt



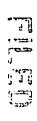


900418151699

10/31/23--01025--012 **35.00



023 OCT 31 PH 3



COVER LETTER

то:	Amendment Section Division of Corporations
SUBJ	ECT: Families In Arms Inc.
	(Name of Corporation)
DOCU	JMENT NUMBER: N21000005362
The en	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing
Please	return all correspondence concerning this matter to the following:
Unit	ed States Corporation Agents, Inc.
	(Name of Person)
Leg	jalzoom.com, Inc.
	(Name of Firm/Company)
990	00 Spectrum Dr.
	(Address)
Aus	stin, TX 78717
	(City/State and Zip Code)
For fur	ther information concerning this matter, please call:
	ar / 800 \ 773-0888
-	(Name of Person) at () (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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),			
Florida Statutes, the undersigned. United States Corporation Agents, Inc.			
(Name of Regi	istered Agent)		
hereby resigns as Registered Agent for Families In Arms	s Inc.		
(Name of C	orporation)		
N21000005362			
(Document Number, if known)			
A copy of this resignation was mailed to the above listed corpora	tion at its last known address.		
The agency is terminated and the office discontinued on the 31st this statement is filed.	day after the date on which		
(Signature of Resigning Agent)	2023		
If signing on behalf of an entity:	2023 OCT 31		
Cheyenne Moseley	—————————————————————————————————————		
(Typed or Printed Name)			
	ສ. ຜ		
Asst. Secretary for United States Corporation	ى مىن مىن مىن مىن مىن مىن مىن مىن مىن مى		
(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