1722 0000000 390

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Numer)
(Document Number)
,
Certified Copies Certificates of Status
Constitution of Siling Officer
Special Instructions to Filing Officer:

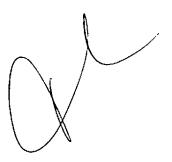




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05/01/24--01019--002 **35.00

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Harmony, Grace & Hope Inc.	
(Name of Corporation)	<u> </u>
DOCUMENT NUMBER: N22000000390	
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:	
United States Corporation Agents, Inc.	
(Name of Person)	2
Legalzoom.com, Inc.	2024 HAY -
(Name of Firm/Company)	
9900 Spectrum Dr.	- Total
(Address)	
Austin, TX 78717	AM 8: 46
(City/State and Zip Code)	
For further information concerning this matter, please call:	
_{at} 800 \ 773-0888	8
(Name of Person) (Area Code & Daytime Teleph	none 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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			
Florida Statutes, the undersigned. United States Corporation Agents, Inc. (Name of Registered Agent)	D		
hereby resigns as Registered Agent for Harmony, Grace & Hope Inc. (Name of Corporation)	C.		
N2200000390			
(Document Number, if known)			
A copy of this resignation was mailed to the above listed corporation at its last known	own ac	ldress.	
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	on wh	nich	
(Signature of Resigning Agent)		202	
If signing on behalf of an entity:		2024 MAY - 1	1
Cheyenne Moseley	: See		
(Typed or Printed Name)		AM 8: 46	
Asst. Secretary for United States Corporation Agents, Inc.	Ē.	φ	
(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