N23000005392

(Requestor's Name)
(Address)
· ·
(4.11
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(5.2)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
·
Special Instructions to Filing Officer:

Office Use Only



700420518817

12/22/23--01016--001 **35.00

2023 DEC 22 PH 3: 18
SECRETARY OF STATE

COVER LETTER

Division of Corporations	
SUBJECT: GREEN PATHWAYS AND SOLUTIONS, INC.	
(Name of Corporation)	
DOCUMENT NUMBER: N23000005392	
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) Legalzoom.com, Inc.	=~5 t
Legalzoom.com, Inc. (Name of Firm/Company)	1 0 d
9900 Spectrum Dr.	(() - -
Austin, TX 78717 (City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) at (800) 773-0888 (Area Code & Daytime Telephone Number) Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corners	•

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 secti	ons 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	United States Corporation Agents, Inc.
	(Name of Registered Agenty
hereby resigns as Registered Ager	or for GREEN PATHWAYS AND SOLUTIONS, INC.
hereby resigns as Registered Ager	(Name of Corporation)
N23000005392	
(Document Number, if known)	
A copy of this resignation was ma	illed to the above listed corporation at its last known address.
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the date on which
	CU
	(Signature of Resigning Agent)
If signing on behalf of an entity:	SECRETAR TALLARS
Cheyenne	INDSCIED S
	(Typed or Printed Name)
	트
Asst. Secretar	y for United States Corporation Agents, Inc.
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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