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

Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations

LIVING WATER WORSHIP CENTER TWC.
(Name of Corporation) DOCUMENT NUMBER: 19300000421

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:

LEON E. CARR
(Name of Person)

LIVING WATER WORShip Contex, INC.

(Name of Firm/Company)

11040 APPLE Blossom TRL, W.

P.O. BOX 26983

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at (904) 502-22/9 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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