N9300005699

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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 24, 2012

MAGDALENA A. FORLENZA MONDEX SHARE A PET INC 2597 LANCEWOOD STREET BUNNELL, FL 32110 1 de 30 2 Agent

Re: Document Number N93000005699

The Articles of Dissolution dissolving MONDEX SHARE A PET, INC., a Florida corporation, were filed on August 23, 2012.

Should you have any questions regarding this matter, please telephone (850) 245-6050, the Amendment Filing Section.

Sylvia Gilbert Regulatory Specialist II Division of Corporations

Letter Number: 912A00021797

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: MONDEX SHARE A PET INC
(Name of Corporation)

DOCUMENT NUMBER: N 9300005699

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:

Magdalena A FORLENZA

(Name of Person)

Mongex SHARE APET INC

(Name of Firm/Company)

2597 Lancewood Street
(Address)

B-unney FL 32118
(City/State and Zip Code)

For further information concerning this matter, please call:

Magdalena A FORLENZA at (386) 437 8459
(Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Magclalena A FORLENZA (Name of Registered Agent)
hereby resigns as Registered Agent for MONDEX SHARE A PET INC (Name of Corporation)
N 9300005699 (Document Number, if known)
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.
Magelalena A Lovenge (Signature of Resigning Agent)
If signing on behalf of an entity:
(Typed or Printed Name)
(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