P010000 42635

| (Requestor's Name) | | | |
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| PICK-UP WAIT MAIL | | | |
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| (Business Entity Name) | | | |
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| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
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Office Use Only



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TRANSMITTAL LETTER

| 10: | Division of Corporations | |
|-----------------------------|--|--|
| SUBJ | BJECT: GULFCOAST TRANSFER 8 | STORAGE, INC. |
| | (r | Name of Corporation) |
| DOC | CUMENT NUMBER: P010000426 | 35 |
| The en | enclosed Resignation of Registered Age | ent for a Corporation and fee are submitted for filing. |
| Please | se return all correspondence concerning | this matter to the following: |
| Kelly | lly Vernay-Gonzalez | |
| | (Name of Person) | |
| Gulfo | ilfcoast Transfer & Storage, Inc. | |
| | (Name of Firm/Company) | · · · · · · · · · · · · · · · · · · · |
| 3651 | 51 Bateman Road | |
| | (Address) | |
| Alva | va, Florida 33920 | |
| | (City/State and Zip Code) | |
| For fu | further information concerning this mat | er, please call: |
| Andr | drew S. Epstein | at (239) |
| | (Name of Person) | at (239) (Area Code & Daytime Telephone Number) |
| Enclos or \$35 | losed is a check made payable to the Flo 35.00 for an administratively dissolved, | rida Department of State for \$87.50 for an active corporation voluntarily dissolved or withdrawn corporation. |
| Amend Division P.O. B | endment Section Amena sion of Corporations Division Box 6327 409 E. | Address: Iment Section on of Corporations Gaines Street assee, FL 32399 |

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

| Pursuant to the provisions of section | ns 607.0502(2), 617.0502(2), 607.1509, or 617 | .1509, |
|--|--|--|
| Florida Statutes, the undersigned, | Andrew S. Epstein | |
| , | (Name of Registered Agent) | <u> </u> |
| hereby resigns as Registered Agent | for Gulfcoast Transfer & Storage, Inc. | |
| | (Name of Corporation) | |
| P01000042635 | | |
| (Document Number, if known) | | |
| - | ed to the above listed corporation at its last kno | |
| The agency is terminated and the of this statement is filed. | fice discontinued on the 31st day after the date | m which O4 FEB 20 |
| If signing on behalf of an entity: Andrew S. Eps | (Signature of Resigning Agent) | O M 8: 54 SEE, FLORID |
| | (Typed or Printed Name) | e de la companya de l |
| Registered Ag | ent | |
| | (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