P01000059952

(Address) (Address) (Address) (City/State/Zip/Phone #)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/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



000182814770

07/06/10--01031--033 **87.50

TO JUL -S TH 1: 89
SECRETARY OF STATE
ALLARASSECT FLORIDA

C.COULLIETTE
JUL 08 2010

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: C+CHARVESTING TNC. (Name of Corporation)
DOCUMENT NUMBER: POLOXXXX 59952
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:
JOE MITCHELL SIMS (Name of Person)
C+C HARVESTING INC (Name of Firm/Company)
SUS ME 3rd ST (Address)
Belle Glade FC 33430 (City/State and Zip Code)
For further information concerning this matter, please call:
Nitchell Sim at (56) 261-767 (Name of Person) at (56) 261-767 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Jore Mitchell Sims (Name of Registered Agent)
hereby resigns as Registered Agent for Che HARVESTING, TNC., (Name of Corporation)
Po 10005995) (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.
(Signature of Resigning Agent) If signing on behalf of an entity:
TOE Mikhell Sinds (Typed or Printed Name) Regi Agent (Capacity)
Fee for filing this document:
\$87.50 - Active corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation