

PO1000080902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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10 JAN 27 AM 10:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. Resque
C.COULLIETTE

JAN 28 2010

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Renaissance Design Center, Inc
(Name of Corporation)

DOCUMENT NUMBER: P01000080902

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:

David Magen

(Name of Person)

(Name of Firm/Company)

3870 N 31st Terrace

(Address)

Hollywood, FL 33021

(City/State and Zip Code)

For further information concerning this matter, please call:

David Magen

(Name of Person)

at (305) 970-6875

(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 20, 2009

DAVID MAGEN
3870 N. 31ST TERR
HOLLYWOOD, FL 33021

SUBJECT: RENAISSANCE DESIGN CENTER, INC.
Ref. Number: P01000080902

RECEIVED
2010 JAN 27 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for RENAISSANCE DESIGN CENTER, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$52.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 309A00036128

**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, David Magen

(Name of Registered Agent)

hereby resigns as Registered Agent for Renaissance Design Center, Inc

(Name of Corporation)

P01000080902

(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)
(Signature of Resigning Agent)

If signing on behalf of an entity:

(Name)
(Typed or Printed Name)

(Capacity)
(Capacity)

FILED
10 JAN 27 AM 10:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Fee for filing this document:

~~\$87.50~~ - Active corporation

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withdrawn corporation

\$87.50

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