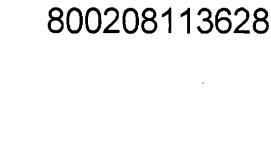
Po1000113841

(Re	equestor's Name)	
(Ac	ddress)	<u>, , , , , , , , , , , , , , , , , , , </u>
(Ac	ldress)	
,(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: JoVin Constructio	n, Inc.
·	Corporation)
DOCUMENT NUMBER: P01000113841	·
The enclosed Resignation of Registered Agent for a	Corporation and fee are submitted for filing.
Please return all correspondence concerning this ma	•
Tula Michele Haff, Esquire	٠.,
(Name of Pérson)	
Law Office of Tula Michele Haf (Name of Firm/Company)	<u>f</u>
135 N. 6th Street, Second Floor	r
(Address)	
Haines City, FL 33844	
(City/State and Zip Code)	
For further information concerning this matter, please	se call:
at (863 421-2626 rea 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

ruisuant to the provisions of sect	lolis 007.0302(2), 017.0302(2), 007.1309, 01 017.1309,
Florida Statutes, the undersigned,	Tula Michele Haff
	(Name of Registered Agent)
hereby resigns as Registered Age	nt for JoVin Construction, Inc.
	(Name of Corporation)
P01000113841	
(Document Number, if known)	
A copy of this resignation was m	ailed 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:	
	SEC TALL
•	(Typed or Printed Name)
	(Typed or Printed Name) HAY 26 FI
	(7)
	(Capacity)
	(Capacity)
	₽ 53
•	

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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