Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : I20020000144 Phone : (305)520-2344 Fax Number : (305)520-2400

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REGISTERED AGENT RESIGNATION COSMA PBPOC, INC.

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APR 27 2017

COVER LETTER

17 APR 26 AM II: 1

TO:

Amendment Section

Division of Corporations

SUBJECT: COSMA PBPOC, INC

(Name of Corporation)

DOCUMENT NUMBER: P02000100387

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:

KOLLEEN COBB

(Name of Person)

FLORIDA EAST COAST INDUSTRIES, LLC

(Name of Firm/Company)

2855 LE JEUNE ROAD., 4TH FL

(Address)

CORAL GABLES, FL 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

BRENDA JOHNSON

...305

5202427

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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, KOLLEEN COBB

(Name of Registered Agent)

hereby resigns as Registered Agent for COSMA PBPOC, INC.

P02000100387

(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.

If signing on behalf of an entity:

KOLLEEN COBB

(Typed or Printed Name)

REGISTERED AGENT

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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