

PO2000106606

(Requestor's Name)



Terry Gronenthal
2248 Morningside Dr.
Clearwater, FL 33764

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

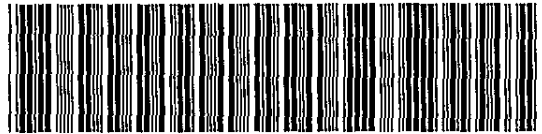
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TRANSMIT

LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Masterpiece Tile Gallery & Design Studio, Inc
(Name of Corporation)

DOCUMENT NUMBER: PO2000-1606

The enclosed Resignation of Registered Agent for Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter the following:

Lisa G. Webb
(Name of Person)

Masterpiece Tile Gallery & Design Studio, Inc.
(Name of Firm/Company)

1812 Drew Street
(Address)

Clearwater, FL 3376
(City/State and Zip Code)

For further information concerning this matter, please call:

Andrea Gronenthal at (714) 443-7395
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gulf
Tallahassee, FL 32399

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(1), 607.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Andrea Gronenthal
(Name of Registered Agent)

hereby resigns as Registered Agent for Mosaic Piece Tile Gallery + Design Studio, Inc.
(Name of Corporation)

PD2006 106606
(Document Number, if known)

A copy of this resignation was mailed to the above 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.

Andrea Gronenthal
(Signature of Registered Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

Fee for filing this document:
\$87.50 - Active corporation
\$35.00 - Administrative dissolution/voluntarily dissolved/withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 7
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

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