PO2000109379

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TO: Amendment Section **Division of Corporations** SUBJECT: AMERICAN MOBILITY, INC. DOCUMENT NUMBER: P02000109379 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: FRANK C. MIRANDA (Name of Person) FRANK CHARLES MIRANDA, P.A. (Name of Firm/Company) 3226 W. Cypress St. (Address) Tampa, FL 33607 (City/State and Zip Code) For further information concerning this matter, please call: Frank C. Miranda (Name of Person)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 secti	ons 607.0502(2), 617.0502(2), 607.	.1509, or 617.1509,
Florida Statutes, the undersigned,	FRANK CHARLES MIRAN	
_	(Name of Registere	
haraby resigns as Dagistared Aper	AMERICAN MO	BILITY, INC.
fictedy tesigns as Registered Ager	(Name of Corpor	ration)
P02000109379		
(Document Number, if known)		
A copy of this resignation was ma	iled to the above listed corporation	at its last known address.
The agency is terminated and the this statement is filed.	office discontinued on the 31st day	after the date on which
	(Signature of Resigning Agent)	
If signing on behalf of an entity:	(Signature of resing rigons)	
FRANK (C. MIRANDA	100 E83
	(Typed or Printed Name)	001 2
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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