

PO3000054744

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

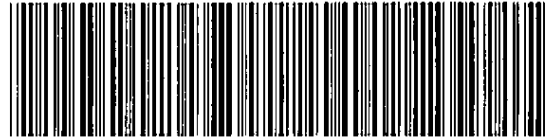
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2024 JUL 15 PM 3:11



COLEMAN YOVANOVICH KOESTER

4001 Tamiami Trail North, Suite 300  
Naples, Florida 34103  
T. 239.435.3535 | F: 239.435.1218

Writer's Email:  
[alpeschetto@cyklawfirm.com](mailto:alpeschetto@cyklawfirm.com)

June 12, 2024

**VIA OVERNIGHT DELIVERY**

Division of Corporations  
Registration Section  
The Centre of Tallahassee  
2415 North Monroe Street, Suite 810  
Tallahassee, Florida 32303

Re: Resignation of Registered Agent for SHANE'S CABANA BAR, INC.,  
a Florida corporation  
Document # P03000054744

Gentlemen:

Enclosed please find our firm's operating account check number 37510 payable to the Department of State in the amount of \$87.50 in payment of the filing fee for the enclosed *Resignation of Registered Agent for a Corporation*.

Please contact me with any questions or comments.

Sincerely,

Amy Pescetto

Enclosures

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

2024 JUN 11 PM 3:11

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, KEVIN G. COLEMAN  
(Name of Registered Agent)

hereby resigns as Registered Agent for SHANE'S CABANA BAR, INC.  
(Name of Corporation)

P03000054744  
(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 of Resigning Agent)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(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withdrawn corporation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