## P03000063539

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
	CT: OFF	
Special Instructions to I	Hiling Officer:	
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SECRETARY OF STATE

## **COVER LETTER**

Division of Corporations	
JCB87, INC.	
	(Name of Corporation)
DOCUMENT NUMBER: P0300006353	39
The enclosed Resignation of Registere	red Agent for a Corporation and fee are submitted for filing
Please return all correspondence conc	cerning this matter to the following:
Cynthia L Babione	
(Name of Person	11)
(Name of Firm/Comp	ipany)
14750 NE 75th ST	
(Address)	
Bronson, FL 32621	
(City/State and Zip C	Code)
For further information concerning thi	nis matter, please call;
Cynthia L Babione	at ()
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303