

P03 0000 108867

✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

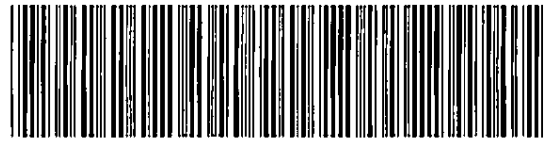
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100433574731

09/18/24--01023--014 \*\*35.00

2024 SEP 18 PM 12:00  
STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Moving Staffers, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** P03000068867

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:

**Brenna Lutter**

(Name of Person)

**Business Filings Incorporated**

(Name of Firm/Company)

**525 Junction Rd Ste 5000**

(Address)

**Madison, WI 53717**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Brenna Lutter**

(Name of Person)

at ( **608** ) **827-7629**

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

(Name of Registered Agent)

hereby resigns as Registered Agent for Moving Staffers, Inc.

(Name of Corporation)

P03000068867

(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:

Brenna Lutter

(Typed or Printed Name)

Asst Secretary for Business Filings Incorporated

(Capacity)

SECRETARY OF STATE  
TALLAHASSEE, FL

2024 SEP 18 PM 12:00

**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**