100300087363

(R	equestor's Name)	
(Ai	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Na	me)
(D	ocument Number)
Certified Copies	Certificate	es of Status
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LANDING LANDING

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Thaving Clothing, In. (Name of Corporation)
DOCUMENT NUMBER: P0300087363
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:
Alison Gentry (Name of Person)
Business Filings Incorporated (Name of Firm/Company)
8025 Excelsion Dr. Ste 200 (Address)
Madison WI 537/7 (City/State and Zip Code)
For further information concerning this matter, please call:
AliSon (Dentoy at (800)981-7/93 X261 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active cor

corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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. Gaines Street
Tallahassee, FL 32399

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 Thwing Cathing, The. (Name of Corporation)	
PO300037363 (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 Rodgining Agent)	
If signing on behalf of an entity:	
Mark Schiff (Typed or Printed Name)	TI
Assusmur Vine President	-

<u>Fee for filing this document:</u>

★\$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#\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)