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TO:	Amendment Section
	Division of Corporations

Resignation SUBJECT:

(Name of Corporation)

DOCUMENT NUMBER: P03000145290

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:

David C. Gilmore

(Name of Person)

David C. Gilmore, Esq.

(Name of Firm/Company)

7620 Massachusetts Avenue

(Address)

New Port Richey, FL 34653

(City/State and Zip Code)

For further information concerning this matter, please call:

David C. Gilmore

(Name of Person)

727 849-2296
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 $607.0502(2)$, $617.050\cancel{2}(2)$, 6	07.1509, or 617.1509,
Florida Statutes, the undersigned, Cathy L. Westmoreland	
(Name of Regis	tered Agent)
nereby resigns as Registered Agent for Westmoreland's A	A/C Inc.
(Name of Co	poration)
P03000145290	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporati	on at its last known address.
The agency is terminated and the office discontinued on the 31st d	ay after the date on which
() ather & alles	tmore (and
(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Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/vo withdrawn corporation	luntarily dissolved/
Make checks payable to Florida Department of Stat	e and mail to:
Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	