ivision of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

Fax Number : (850) 617-6380

From:

Account Name : ALA REGISTERED AGENC INC.

: (561)202-8082

Account Number : 120090000032 Phone : (561)792~2236

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

REGISTERED AGENT RESIGNATION LMS CONSTRUCTION INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 613	7 1509
Florida Statutes, the undersigned, A1A REGISTERED AGENT INC.	
(Name of Registered Agent)	
hereby resigns as Registered Agent for LMS CONSTRUCTION INC	D.
(Name of Corporation)	
P0400000454	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known	own address.
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	on which
(Signature of Resigning Agent)	,
If signing on behalf of an entity:	
•	200
TINA MAKI	
(Typed or Printed Name)	8-40
DP	- 7
(Capacity)	7. AH 8: 54
Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved	ed/

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallabassee, FL 32314

withdrawn corporation

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