PO40000 3783

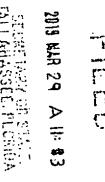
(Requestor's Name)
(Address)
(Åddress)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Bill Dimmons Painting Inc (Name of Corporation) J DOCUMENT NUMBER: PO 40000 3783
DOCUMENT NOMBER: 40 100000 3783
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:
Name of Person)
(Name of Firm/Company)
(Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
Elvi Summons at (235) 653-6848 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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	
Florida Statutes, the undersigned, Leven Course Simm	ions
Florida Statutes, the undersigned, Devin Court Simme (Name of Registered Agent) hereby resigns as Registered Agent for Bill Simmon (Name of Corporation)	inling, Inc
(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 of this statement is filed. West filed by mistake - meant of the discontinued on the 31st day after the of this statement is filed. (Signature of Resigning Agent)	late on which ite put in
If signing on behalf of an entity:	
Elvie M. S; mmons (Typed or Printed Name) Secretary (Capacity)	
Fee for filing this document: \$87.50 - Active Corporation	H NAR 29 A III
\$35.00 - Administratively dissolved/voluntarily dissolved/withdrawn corporation	solved/ ∵ &

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