P04000151753

	Requestor's Name)
	(Address)
((Address)
	City/State/Zip/Phone #)
	Business Entity Name)
	Document Number)
Certified Copies	Certificates of Status
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	COVER LETTER	2018 APR -2	AN AF 7
	ndment Section sion of Corporations		
SUBJECT	ALL STAR MANAGEMENT, INC (Name of Corporation)		
DOCUME	P04000151753		
The enclose	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) ALL STAR MANAGEMENT, INC (Name of Firm/Company) (Address) (City/State and Zip Code) For further information concerning this matter, please call:

(Name of Person) at (_____) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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:

1

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

	•• <u>•</u>
· ·	RESIGNATION OF REGISTERED AGENT
	FOR A CORPORATION $2010 \text{ APR} - 2$
	e provisions of sections 607.0502(2), 617.0502(2), 607.1509. or 617.1509. S. the undersigned.
i foridu 5 ature	(Name of Registered Agent)
hereby religns	as Registered Agent for
P040001517	(Name of Corporation) 53
(Docume	ent Number, if known)
A copy of this	resignation was mailed to the above listed corporation at its last known addre
If signing on b	(Signature of Resigning Agent) ehalf of an entity:
If signing on b	
If signing on b	ehalf of an entity:
If signing on b	ehalf of an entity: (Typed or Printed Name)