Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Æmmail Address:

Account Name

: INCORPORATING SERVICES FL

Account Number: 120050000052 Phone

: (302)531-0855

Fax Number

: (850)656-7953

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

## REGISTERED AGENT RESIGNATION TRESOR CORPORATION

Certificate of Status	0
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Estimated Charge	\$87.50

Electronic Filing Menu

Corporate Filing Menu

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## **COVER LETTER**

Division of Corporations
SUBJECT: TRESOR CORPORATION
(Name of Corporation)
DOCUMENT NUMBER: P04000152654
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:
TUNISHA SCOTT
(Name of Person)
INCORPORATING SERVICES, LTD.
(Name of Firm/Company)
3500 S. DUPONT HWY.
(Address)
DOVER, DE 19901
(City/State and Zip Code)
For further information concerning this matter, please call:
TUNISHA SCOTT at ( 800 ) 346-4646  (Name of Person) (Area Code & Daytime Telephone Number)
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	18 <b>0</b> 07.0302(2), 017.0302(2), 007.1303, 01 01	7.1303,
Florida Statutes, the undersigned, INCORPORATING SERVICES LTD.		·
	(Name of Registered Agent)	
hereby resigns as Registered Agent	for TRESOR CORPORATION	
moreel randing as treditionerB	(Name of Corporation)	·
P04000152654		
(Document Number, if known)		
A copy of this resignation was maile	ed to the above listed corporation at its last ki	nown address.
The agency is terminated and the of this statement is filed.	fice discontinued on the 31st day after the day  (Signature of Resigning Agent)	e on which
If signing on behalf of an entity:	·	<b>1</b> 3
AMY M. BALK	E	IS HAY
. <del> </del>	(Typed or Printed Name)	6
ASSISTANT S	ECRETARY	2 1
	(Capacity)	

## Fee for filing this document:

\$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