

P050000068245

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(Business Entity Name)

(Document Number)

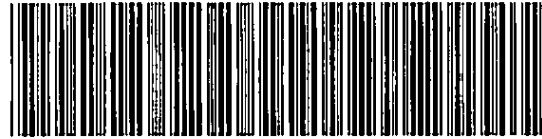
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SECRETARY OF STATE  
TALLAHASSEE, FL 32399

2021 OCT 18 AM 12:52

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2021 OCT 18 AM 11:31

October 8, 2021

KATHERINE A BARSKI  
8564 E COUNTY RD 466  
UNIT 102  
THE VILLAGES, FL 32162 US

SUBJECT: C.A.M. CO. SALES, INC.  
Ref. Number: P05000068245

We have received your document for C.A.M. CO. SALES, INC. and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED LIABILITY COMPANY, but your entity is a PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$2.50 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne  
Regulatory Specialist II

Letter Number: 921A00024193

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** C. A. M. CO. SALES INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000068245

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:

Katherine Barski  
(Name of Person)

Boyer Munn S  
(Name of Firm/Company)

8561 E. County Rd. 466, Unit 102  
(Address)

The Villages FL 32162  
(City/State and Zip Code)

For further information concerning this matter, please call:

Katherine Barski at ( 352 ) 391-6031  
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

FILED

RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION

2021 OCT 18 AM 12:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, KATHERINE A. BARSKI, ESQ.  
(Name of Registered Agent)

hereby resigns as Registered Agent for C.A.M. CO. SALES, INC.  
(Name of Corporation)

PO5000068245  
(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 date on which this statement is filed.

*Katherine A. Barski*  
(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/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