0105000120944

(Re	questor's Name)	
DA)	dress)	
— (Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	_
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
	-	

Office Use Only



100304249551

10/09/17--01020--011 **35.00

S TALLENT OCT 20 2017

RA Resign



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 10, 2017

OCT 1 6 2017

TINA GIGNAC CONTRACTOR BUSINESS SERVICES, INC. 8301 JOLIET STREET HUDSON, FL 34667

SUBJECT: SOUTH STARR ENTERPRISES, INC.

Ref. Number: P05000120944

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

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.

Susan Tallent Regulatory Specialist II

Letter Number: 517A00020417

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SOUTH STARR ENTERPRISES, INC.
(Name of Corporation) DOCUMENT NUMBER: P05000120944
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filin
Please return all correspondence concerning this matter to the following:
TINA GIGNAC
(Name of Person)
CONTRACTOR BUSINESS SERVICES, INC.
(Name of Firm/Company)
8301 JOLIET STREET
(Address)
HUDSON, FL 34667
(City/State and Zip Code)
For further information concerning this matter, please call:
TINA GIGNAC at (727)868-8862
(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 of

or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 617.1	509.		
Florida Statutes, the undersigned, CONTRACTOR BUSINESS SERVICE	ES, IN	C.	
(Name of Registered Agent)			
hereby resigns as Registered Agent for SOUTH STARR ENTERPRISE	S, IN	C.	
(Name of Corporation)			
P05000120944			
(Document Number, if known)			
A copy of this resignation was mailed to the above listed corporation at its last know	vn addre	ess.	
The agency is terminated and the office discontinued on the 31st day after the date of this statement is filed.	n which	1	
(Signature of Resigning Agent)			
If signing on behalf of an entity:		7 0(
		<u>:-</u> i	1
		9	
(Typed or Printed Name)	•;	MID:	
		Ö	
		57	

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

(Capacity)