(Re	equestor's Name)	·
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
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COVER LETTER

TO:	Amendment Section Division of Corporations	
	Division of Corporations	
SUBJ	TECT: E & J ARCO CLEANING, INC	
	(Name of Corporation)	
DOC	UMENT NUMBER: P06000030385	
The er	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filin	ıg.
Please	e return all correspondence concerning this matter to the following:	
JOS	SE PICHARDO	
	(Name of Person)	
E & -	J ARCO CLEANING, INC	
	(Name of Firm/Company)	
1125	5 COBBLESTONE CIR. APT H	
	(Address)	
KISS	SIMMEE, FLORIDA 34744	
	(City/State and Zip Code)	•
For fu	orther information concerning this matter, please call:	
JOSE	E PICHARDO at (407) 844-9460	
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 provision	ns of sections 6	07.0502(2), 617.0502(2), 6	07.1509, or 6	17.1509,	
Florida Statutes, the un	dersigned, <u>JO</u>	SE PICHARDO (Name of Regis	torod Agent)	····	
		•	-		
hereby resigns as Regis	tered Agent for	E & J ARCO CLEANIN	moration)		<i>5</i>
P06000030385		(Name of Con	porution		
(Document Numbe	r, if known)	******			
A copy of this resignati	on was mailed to	the above listed corporati	on at its last l	known address.	
The agency is terminate this statement is filed.	\mathcal{J}	discontinued on the 31st d	ay after the da	ate on which	
	(Sig	gnáture of Resigning Agent)			
If signing on behalf of a	in entity:				
10	SE PICHARDO			O7 JUL SECRE	
	(Typed or Printed Name)		HAS.	فتطنتن
PR	ESIDENT			AM 10: 04 SEE, FLORID	
		(Capacity)		TATE ORIDA	***************************************

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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