

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : AlA RECISTERED AGENT INC.

Account Number : 120090000032 : (866)703-8928 Phone

Fax Number : (561)202-8082

REGISTERED AGENT RESIGNATION

LOLA'S CONSULTING SERVICES, INC.

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$35.00

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509.

. With the time bearing as according			
Florida Statutes, the undersigned,A	1A REGISTERED AGENT INC.		
	(Name of Registered Agent)		
hereby resigns as Registered Agent for	LOLA'S CONSULTING SERVICES, INC.		
	(Nume of Corporation)		
P06000052643			
(Document Number, if known)			
A copy of this resignation was malled	to the above listed corporation at its last known address.		
The agency is terminated and the offic this statement is filed.	e discontinued on the 31st day after the date on which		
J_n	raffnak sec	AON 5002	and and
(S	lignature of Resigning Agent)	A C	-
If signing on behalf of an entity:	SSEE.	2	
TINA MAKI	ር ነው። የም	<u>목</u> ;;	n
	(Typed or Printed Name)	: 3 8	
PRESIDENT		•	
	/O		

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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
Tullahassee, FL 32314

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