

P06000054459

Requestor's Name

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

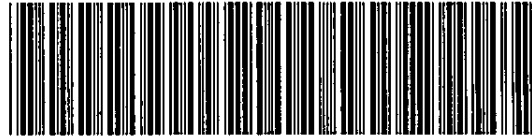
(Document Number)

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03/22/16--01010--009 \*\*42.50

02/16/16--01034--015 \*\*105.00

16 MAR 15 AM 8:38  
STATE  
TALLAHASSEE, FLORIDA

RA Resigned

MAR 17 2016

D CONNELL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 1, 2016

ANDREA CUBIT  
1599 SW 21 STREET  
BOCA RATON, FL 33486

SUBJECT: G & G INSURANCE ADJUSTERS INC  
Ref. Number: P06000054459

We have received your document and check(s) totaling \$45.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$42.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The fee to resign as registered agent of an active corporation is \$87.50.

OUR RECORDS REFLECT THAT Andrea Cubit IS LISTED ON THIS CORPORATION AS THE REGISTERED AGENT. PLEASE COMPLETE THE ATTACHED RESIGNATION FORM FOR A REGISTERED AGENT RESIGNING AS THIS INDIVIDUAL IS NOT LISTED AS AN OFFICER OR DIRECTOR IN THIS CORPORATION.

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.

Darlene Connell  
Regulatory Specialist III

Letter Number: 216A00004053

RECEIVED  
16 MAR 15 PM 1:47

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** \_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** \_\_\_\_\_

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:

Andrea Cubert  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

1599 SW 21 STREET  
(Address)

BOCA RATON, FL 33486  
(City/State and Zip Code)

For further information concerning this matter, please call:

Andrea Cubert at (954) 937-0237  
(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 provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, Andrea Cubit

(Name of Registered Agent)

hereby resigns as Registered Agent for G & G Insurance Adjusters Inc

(Name of Corporation)

PO6000054459

(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.

Andrea Cubit

(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

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FLORIDA  
STATE  
DEPARTMENT  
TALLAHASSEE, FLORIDA