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(City/State/Zip/Phone #)

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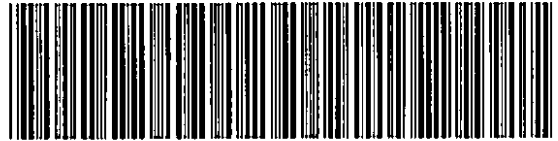
(Business Entity Name)

(Document Number)

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FILED  
2021 APR 23 AM 8:14  
SECRETARY OF STATE  
TALLAHASSEE, FL



BARBARA M. PIZZOLATO, PA

ATTORNEY AT LAW

ESTATE PLANNING  
TRUST ADMINISTRATION  
PROBATE  
BUSINESS PLANNING

**BENJAMIN D. GRAY**

*Administrative Assistant*

April 21, 2021

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: HANNERS FAUX FINISHINGS, INC./Statement of Resignation of Registered Agent for a Corporation**

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Dear Sir or Madam:

Enclosed herewith for filing please find Statement of Resignation of Registered Agent for a Corporation for the above-referenced Corporation together with this firm's check in the amount of \$35.00, which check represents payment of the required filing fee.

Should you have any questions or comments, please do not hesitate to contact me.

Very truly yours,

Benjamin D. Gray  
Administrative Assistant  
Enclosures (2)  
cc: Hanners Faux Finishings, Inc.

BY APPOINTMENT ONLY

12751 New Brittany Blvd.  
Suite 402  
Fort Myers, FL 33907  
P: 239-225-7911  
F: 239-221-0279

Suite 240, One Suffolk Square  
1601 Veterans Memorial Hwy  
Islandia, NY 11749  
P: 866-817-4713  
F: 239-221-0279

c/o Richard A. Feldman, Esq.  
80 Main Street, Suite 140  
West Orange, NJ 07052  
P: 866-817-4713  
F: 239-221-0279

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** HANNERS FAUX FINISHINGS, INC.  
\_\_\_\_\_

(Name of Corporation)

**DOCUMENT NUMBER:** P06000065305  
\_\_\_\_\_

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:

BARBARA M. PIZZOLATO, ESQ.  
\_\_\_\_\_

(Name of Person)

BARBARA M. PIZZOLATO, P.A.  
\_\_\_\_\_

(Name of Firm/Company)

12751 NEW BRITTANY BLVD., STE 402  
\_\_\_\_\_

(Address)

FORT MYERS, FL 33907  
\_\_\_\_\_

(City/State and Zip Code)

For further information concerning this matter, please call:

BARBARA M. PIZZOLATO  
\_\_\_\_\_

(Name of Person)

at ( 239 ) 225-7911

(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

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

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

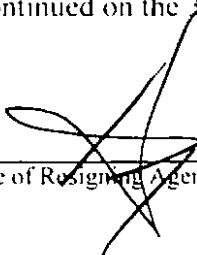
Florida Statutes, the undersigned, BARBARA M. PIZZOLATO, PA  
(Name of Registered Agent)

hereby resigns as Registered Agent for HANNERS FAUX FINISHINGS, INC.  
(Name of Corporation)

P06000065305  
(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.

  
(Signature of Resigning Agent)

If signing on behalf of an entity:

BARBARA M. PIZZOLATO, PA  
(Typed or Printed Name)

PRESIDENT  
(Capacity)

FILED  
2021 APR 23 AM 8:15  
SECRETARY OF STATE  
TALLAHASSEE, FL

### 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