Po6000153981

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	> #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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Office Use Only



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resignation

12/19/09--01006--015 **87.50



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COVER LETTER

CHINA	ECT: Richlin Plumbing Inc
20R1	(Name of Corporation)
DOC	UMENT NUMBER: P06000153981
	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing
Please	return all correspondence concerning this matter to the following:
Marc	cia Rose
	(Name of Person)
Pros	speritas Associates Inc
	(Name of Firm/Company)
1532	21 South Dixie Highway, Suite #302
	(Address)
Miar	ni, Florida 33157
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Marc	at (305) 234-9211
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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,

Prosperitas Associates Inc.

(Name of Registered Agent)

Richlin Plumbing Inc

(Name of Corporation)

P06000153981

(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:

Marcia Rose

(Typed or Printed Name)

CFO

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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