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7. FRANCUS;

COVER LETTER

TO:	Amendment Section
	Division of Corporations

SUBJECT: EDWARDS & PARTNERS INC.

(Name of Corporation)

DOCUMENT NUMBER: P07000015178

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:

DIANE NOBILE

(Name of Person)

NOBILE LAW FIRM, P.A.

(Name of Firm/Company)

201 S. BISCAYNE BLVD, SUITE 2650

(Address)

MIAMI, FLORIDA 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

DIANE NOBILE

₃₁₇305 \577-8911

(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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



June 29, 2017

DIANE NOBILE 201 S BISCAYNE BLVD STE 2650 MIAMI, FL 33131

SUBJECT: EDWARDS & PARTNERS, INC.

Ref. Number: P07000015178

We have received your document for EDWARDS & PARTNERS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Diane Nobile is the registered agent not Nobile Law Firm, P.A. Please make the corrections on the document and return for filing.

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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 017A00013216

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 60	7.1509, or 617.1509,
Florida Statutes, the undersigned, DIANE NOBILE, ESQ.	
(Name of Registe	red Agent)
hereby resigns as Registered Agent for EDWARDS & PAF	RTNERS INC.
(Name of Corp	oration)
P07000015178	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation	n at its last known address.
The agency is terminated and the office discontinued on the 31st da this statement is filed. (Signature of Resigning Agent)	y after the date on which
If signing on behalf of an entity:	
(Typed or Printed Name)	
(Typed of Finited Name)	
(Capacity)	
(Capacity)	\ \ \\
Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluments withdrawn corporation	STURE STATE OF STATE

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314