0700011455

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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: PHO MY RESTAUR		
	(Name of Corporation)	
DOCUMENT NUMBER: P	07000114554	
The enclosed Resignation of Register	red Agent for a Corporation and fee are submitted for fill	ing.
Please return all correspondence con-	cerning this matter to the following:	
Karen Loraine (Name of Perso	n)	
GrayRobinson, P.A. (Name of Firm/Com	ppany)	
1795 W. Nasa Blvd. (Address)		
Melbourne, FL 32901 (City/State and Zip	Code)	
For further information concerning the	his matter, please call:	
Michelle Deering (Name of Person)	at (321) 727-8100 (Area Code & Daytime Telephone Number)	
Enclosed is a check made payable to or \$35.00 for an administratively dis-	the Florida Department of State for \$87.50 for an active solved, voluntarily dissolved or withdrawn corporation.	compration
	Mailing Address: Amendment Section	25 S
	Division of Corporations	- 🗲 - 필유학
Clifton Building	Post Office Box 6327	AK III.
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314	17

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, Patrick Healy
(Name of Registered Agent)
hereby resigns as Registered Agent for PHO MY RESTAURANT AT PALM BAY, INC.
(Name of Corporation)
P07000114554
(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:
(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withdrawn corporation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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