## P08000000030

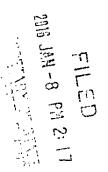
| (Req                      | uestor's Name)   |             |
|---------------------------|------------------|-------------|
| (Add                      | ress)            |             |
| . (Add                    | ress)            |             |
| (City                     | /State/Zip/Phon  | e #)        |
| PICK-UP                   | ☐ WAIT           | MAIL.       |
| (Bus                      | iness Entity Nai | me)         |
| (Doc                      | ument Number)    | )           |
| Certified Copies          | Certificate      | s of Status |
| Special Instructions to F | iling Officer:   |             |
|                           |                  |             |
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(20)

## **COVER LETTER**

| TO: Amendment Section Division of Corporations  |
|---|
| SUBJECT: Cady & Cady Studios, Inc. (Name of Corporation)  |
| DOCUMENT NUMBER: <u>P0800000630</u>   |
| 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:   |
| Luke Carrender (Name of Person)   |
| (Name of Firm/Company)  |
| 498 Sw Ring Ct (Address)  |
| Lake City FL 32025 (City/State and Zip Code)  |
| For further information concerning this matter, please call:  |
| Lule Carrender at (386) 905-0335 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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: Mailing Address: Amendment Section Amendment Section .  |

Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## 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, Luke Carrender (Name of Registered Agen                          | nt)                 |
| hereby resigns as Registered Agent for Cody & Cody Studion (Name of Corporation)                    | ios, Inc.           |
| P0800000630<br>(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 this statement is filed. | the date on which   |
| Lufe W. Caverber  | 2016                |
| (Signature of Resigning Agent)  | 量加                  |
| If signing on behalf of an entity:  | 1 8 F               |
|   | ED PN 2: 17         |
| (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