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## **COVER LETTER**

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TO:	Amendment Section Division of Corporations
SUBJ	ECT: GFY ENTERPRISE AND CONSULTING, INC
	(Name of Corporation)
DOC	UMENT NUMBER: P08000006966
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
sco	OTT BOYD
	(Name of Person)
	(Name of Firm/Company)
270	3 NW 53RD STREET
	(Address)
TAN	IARAC, FL 33309
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
sco	TT BOYD at ( 954 ) 253-0706
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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, SCOTT A. BOYD
(Name of Registered Agent)
hereby resigns as Registered Agent for GFY ENTERPRISE AND CONSULTING, INC
(Name of Corporation)
P0800006966
(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)
(Typed of Finned Name)
6

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)