

P08 000000 8040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

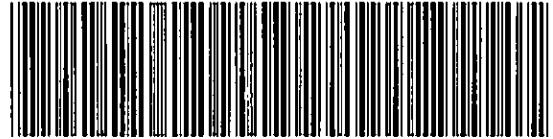
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100343841891

04/27/20--01020--016 **87.50

2020 APR 27 PM 4:47

CA
5/14/20

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Country Bingo, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P08000008040

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:

Maurice Arcadier
(Name of Person)

Arcadier Biggie and Wood
(Name of Firm/Company)

2815 W. New Haven Ave. #304
(Address)

Melbourne, FL 32904
(City/State and Zip Code)

For further information concerning this matter, please call:

Maurice Arcadier at (321) 953-5998
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,


Florida Statutes, the undersigned, Maurice Arcadier
(Name of Registered Agent)

hereby resigns as Registered Agent for Country Bingo, Inc.
(Name of Corporation)

P08000008040
(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:

Mauricio Arcadie,
(Typed or Printed Name)

President
(Capacity)

2020 APR 27 PM 4:47
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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withdrawn corporation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