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(Requestor's Name)

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(City/State/Zip/Phone #)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Fit Firm And Fun, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P 08 0000 52469

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:

Amy Lee  
(Name of Person)

Fit Firm And Fun Inc.  
(Name of Firm/Company)

4326 E Tennessee Ave  
(Address)

Ft. Lauderdale, FL 33308  
(City/State and Zip Code)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**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, FIN CORP Services Inc.  
(Name of Registered Agent)

hereby resigns as Registered Agent for Fit Finm And FOUN INC.  
(Name of Corporation)

P08 000052469

(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]*  
(Signature of Resigning Agent)

If signing on behalf of an entity:

Soudoly Pizano

(Typed or Printed Name)

Account Executive

(Capacity)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 JUN 10 AM 8:42

**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withdrawn corporation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