P08000062911

(Re	equestor's Name)		
(Ad	ldress)		
(Ac	dress)		
(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
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(Document Number)			
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COVER LETTER

	mendment Section Oivision of Corporations		
SUBJEC	T: RJM Custom H	omes, Inc	;
	^^ ·	(Name of Corporat	
DOCUM	1ENT NUMBER: P08000062	2911	
The encle	osed Resignation of Registered A	Agent for a Corpor	ration and fee are submitted for filing.
Please re	turn all correspondence concerni	ing this matter to t	he following:
Kimb	erly Bunner		
	(Name of Person)		_
RJM	Custom Homes,	Inc	
	(Name of Firm/Company	<i>'</i>)	_
5511	Royal Palm Bead	ch Blvd	
	(Address)		-
WPE	3, FL 33411		
	(City/State and Zip Code)	_
For furth	er information concerning this m	atter, please call:	
kimb	erly bunner	_{at (} 561	899-3627 & Daytime Telephone Number)
	(Name of Person)	(Area Code	& Daytime Telephone Number)
Enclosed or \$35.00	I is a check made payable to the log for an administratively dissolve	Florida Departmened, voluntarily disc	nt of State for \$87.50 for an active corporatesolved or withdrawn corporation.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, Ronald Maggio, Jr
(Name of Registered Agent)
hereby resigns as Registered Agent for RJM Custom Homes, Inc
(Name of Corporation)
P08000062911
(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:
Ronald J. Magalo Jr. (Typeder Printed Name)
VP Secretary (Capacity)
(Capacity) SST ATE SST ATE
Fee for filing this document:
\$87.50 - Active Corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation