P08000086352

(Requestor's Name)
(Address)
(Address)
,
(City/Chata/7ix/Chana #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, (Business Emaily Marile)
(Document Number)
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2010 MAR -3 PM 1: 33
SECRETARY OF STATE

R.A. Resign.

TB

MAR -8 2010

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Pro Services Property management inc (Name of Corporation)
DOCUMENT NUMBER:
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:
(Name of Person) (Name of Firm/Company) This company. I would like to be removed a sup (Address) West Palm beach FL. 33401 (City/State and Zip Code) For further information concerning this matter, please call:
(Name of Person) at (954) 548-6349 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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: Street Address:

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

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 $007.0502(2)$, $017.0502(2)$, 007.1509 , or 017.1509 ,
Florida Statutes, the undersigned, Justin Bertrand (Name of Registered Agent)
(Name of Registered Agent)
hereby resigns as Registered Agent for Pro Services Property management inc (Name of Corporation)
<u>P08000086352</u> (Document Number, if known)
\cdot
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.
1. + 2 +
(Signature of Resigning Agent)
If signing on behalf of an entity:
Justin Bertrand
(1 yped of Pfinled Name)
garage and the control of the contro
(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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