# P0800096071

(Requestor's Name)
(Address)
(Address)
(1001000)
(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



500435078265

08/20/24--01032--004 \*\*2380.00

#### **COVER LETTER**

TO: Amendment Section Division of Corporations	
CIVIC CAPITAL, INC.	
	(Name of Corporation)
DOCUMENT NUMBER: P08000096071	<u> </u>
The enclosed Resignation of Registered	d Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concer	rning this matter to the following:
Jeffrey A. Deutch	
(Name of Person)	
Nelson Mullins Riley & Scarborough LLP	
(Name of Firm/Compa	any)
1905 NW Corporate Boulevard, Suite 310	
(Address)	
Boca Raton, FL 33431	
(City/State and Zip Co	rde)
For further information concerning this	s matter, please call:
Jeffrey A. Deutch	at ()
(Name of Person)	at () (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 section	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	Jeffrey Deutch
	(Name of Registered Agent)
hereby resigns as Registered Agen	CIVIC CAPITAL, INC.
nereby resigns as registered regen	(Name of Corporation)
P08000096071	
(Document Number, if known)	
A copy of this resignation was ma	iled to the above listed corporation at its last known address.
The agency is terminated and the chais statement is filed.	office discontinued on the 31st day after the date on which
<u>}</u>	(Signature of Resigning Agent)
If signing on behalf of an entity:	;
Jeffrey Deutch	
	(Typed or Printed Name)
Partner	
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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