

P09000053196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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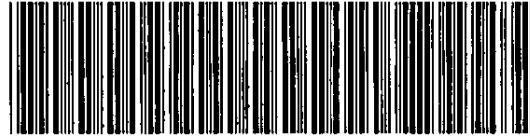
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
16 MAY 10 AM 10:52

MAY 18 2016

C McNAMARA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BEE SAFE SECURITY SOLUTIONS, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P09000053196

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:

ALEXANDER KOORBANOFF
(Name of Person)

(Name of Firm/Company)

2681 LITTLE BEND RD
(Address)

MERRITT ISLAND FL 32952
(City/State and Zip Code)

For further information concerning this matter, please call:

ALEX KOORBANOFF at (321) 537 5190
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

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STATE
DIVISION OF CORPORATIONS
16 MAY 10 11:10:53

**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, ALEXANDER KOORBANOFF

(Name of Registered Agent)

hereby resigns as Registered Agent for BEE SAFE SECURITY SOLUTIONS, Inc

(Name of Corporation)

P09000053196

(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:

ALEXANDER KOORBANOFF

(Typed or Printed Name)

(Capacity)

FILED
SECTION OF CORPORATIONS
DIVISION OF CORPORATIONS
16 MAY 10 PM 10:53

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