P090000 76669

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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SECRETARY OF STATE
SECRE

C. LEWIS SEP 24 2013 EXAMINER

COVER LETTER

10:	Division of Corporations	
SUBJ	ECT: FUNKY MONKEY FU	INDRAISING,INC.
		(Name of Corporation)
DOC	UMENT NUMBER: P090	00076669
The er	nclosed Resignation of Registe	ered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence cor	ncerning this matter to the following:
	Wendy Hefl	еу
(Name of Person)		on)
Incorp Services, Inc.		
(Name of Firm/Company)		npany)
	2360 Corporate Circle	e, Suite 400
	(Address)	
	Henderson, NV	89074
(City/State and Zip Code)		Code)
For fu	rther information concerning t	his matter, please call:
Wend	dy Hefley for Incorp Servic	es, Inc. at (702) 866-2500 ext. 6601 (Area Code & Daytime Telephone Number)
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclos or \$35	sed is a check made payable to .00 for an administratively dis	o the Florida Department of State for \$87.50 for an active corporation ssolved, voluntarily dissolved or withdrawn corporation.
Amen Divisi Cliftor 2661 I	Address: dment Section on of Corporations 1 Building Executive Center Circle assee, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

FILED

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

13 SEP 17 PM 1:30

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Incorp Services, Inc.
(Name of Registered Agent)
hereby resigns as Registered Agent for FUNKY MONKEY FUNDRAISING, INC.
(Name of Corporation)
P0900076669
(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. InCorp Services, Inc. (Signature of Resigning Agent)
If signing on behalf of an entity: Wendy Hefley
(Typed or Printed Name)
(.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Authorized Representative
(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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