P09000098706

(R	equestor's Name)	
. (A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	<u> </u>
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

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COVER LETTER

SUBJECT: Gracie Jiu Jitsu of Pensacola Inc. (Name of Corporation) DOCUMENT NUMBER: P090000 98706 or Unknown	- ,
DOCUMENT NUMBER: PO90000 98 706 or Unknown	, _
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for	r filing.
Please return all correspondence concerning this matter to the following:	
Jeffery L. Colin Jr. (Namy of Person)	
Gracie Jin Jitsy of Pensacok Inc. (Name of Firm/Company)	
211 Brown Road (Address)	
Pensacola, FL 32507 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Teff Chin (Name of Person) at (850) 637-3567 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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, Teffen L. Colvin Tr. (Name of Registered Agent)
hereby resigns as Registered Agent for Gracie Jiu Jisu of Pensacola Inc., (Name of Corporation)
P0900098706 or Unknown (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.
Deflay L. Cohi Qr.
If signing on behalf of an entity:
Teffen L. Colvin Jr. (Typed or Printed Name)
Vice-President and Treasurer

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)