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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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J. HORNE MAY - 8 2024





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04/23/24--01010--005 #35.00





Resignation of Registered Agent for a Corporation

Capitol Corporate Services, Inc.

PO Box 1831 Austin, TX 78767

Phone: (800) 345-4647 Fax: (800) 432-3622 regagent@capitolservices.com

Secretary of State **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

DATE: STATE:

4/17/2024 **FLORIDA**

REP UNIT:

APHELION MANAGEMENT, INC.

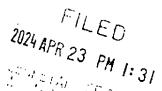
Enclosed for filing please find a Resignation of Registered Agent for a Corporation for the above referenced name, which is to be filed in your office. Enclosed is check # 34183 in the amount of \$35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call (800) 345-4647 and ask for the Registered Agent Department.

Please return file-stamped copy to the following address:

Capitol Corporate Services, Inc. PO Box 1831 Austin, TX 78767



RESIGNATION OF REGISTERED AGENT FOR A CORPORATION



10181/21 STA12
Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509, $\frac{27.5 \times 2.5 \times 2.5 \times 2.5}{27.60 \times 10^{-2}}$
Florida Statutes, the undersigned, Capitol Corporate Services, Inc.
(Name of Registered Agent) hereby resigns as Registered Agent for
APHELION MANAGEMENT, INC.
(Name of Corporation)
P1000001271
(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:
Yvette Cleveland
(Typed or Printed Name)
Assistant Secretary
(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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



RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

FILED

2024 APR 23 PM 1: 32

SECRETAR STATE
FLORIDA

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Capitol Corporate Services, Inc.
(Name of Registered Agent)
hereby resigns as Registered Agent for
APHELION MANAGEMENT, INC.
(Name of Corporation) P1000001271
(Document Number, if known)
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(Typed or Printed Name)
Assistant Secretary
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