## POD00019581

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	÷#)
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(Bu:	siness Entity Nam	ne)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: J&B Building Services, In (Name of Corpora	C
	tion)
DOCUMENT NUMBER: P10000019581	· · · · · · · · · · · · · · · · · · ·
The enclosed Resignation of Registered Agent for a Corpor	ration and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Tina Gignac	
(Name of Person)	_
Contractor Business Services, Inc	<u>.</u>
8301 Joliet Street	
(Address)	_
Hudson, FL 34667	
(City/State and Zip Code)	_
For further information concerning this matter, please call:	
Tina Gignac at (727	862-8862 le & Daytime Telephone Number)
(Name of Person) (Area Cod	e & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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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, Contractor Business Services, Inc	
(Name of Registered Agent)	
hereby resigns as Registered Agent for J&B Building Services, Inc.	
(Name of Corporation)	
P10000019581	
(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.	
Jina Ajanac	
(Signature of Resigning Agent)	
If signing on behalf of an entity:	百日
(Typed or Printed Name)	
(Capacity)	n o

## 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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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, F1, 32314