Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H140000707643)))



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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : SNELL LEGAL Account Number : I20050000126

Phone : (386) 677-3232

Fax Number

: (386) 677-6770

**Enter the email address for this business entity to be used f annual report mailings. Enter only one email address please

Email Address:

REGISTERED AGENT RESIGNATION DAYTONA BEACH POWER SPORTS, INC.

Certificate of Status	0
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Estimated Charge	\$87.50

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COVER LETTER

SUBJECT:	Daytona Beach Power Sports, Inc.
SUBSECT.	(Name of Corporation)
DOCUMENT NUMBER	:P10000048369
The enclosed Resignation	of Registered Agent for a Corporation and fee are submitted for filing
Please return all correspor	dence concerning this matter to the following:
He	ather Bragg
(Na	me of Person)
Sı	nell Legal
(Name o	of Firm/Company)
160 E. Gr	anada Boulevard
	(Address)
Ormond Be	ach, Florida 32176
(City/St	ate and Zip Code)
For further information co	ncerning this matter, please call:
Heather E	ragg 386 677-3232
(Name of P	erson) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

FILED

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RESIGNATION OF REGISTERED AGENTSEE. FLORIDA FOR A CORPORATION

Pursuant to the provisions of sections 607.	0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	Snell Legal
	(Name of Registered Agent)
hereby resigns as Registered Agent for	Daytona Beach Power Sports, Inc.
	(Name of Corporation)
P10000048369	
(Document Number, if known)	
A copy of this resignation was mailed to th	e above listed corporation at its last known address.
The agency is terminated and the office disthis statement is filed.	accontinued on the 31st day after the date on which
If signing on behalf of an entity:	-
Gr	regory D. Snell
(Тур	ed or Printed Name)
Presi	ident, Snell Legal
	(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