

PIO 000081451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

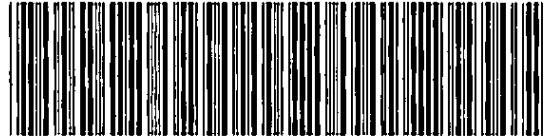
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200328297392

04/23/19--01016--025 \*\*87.50

D SCOTT

MAY 9 2019

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Marigold Construction And Repair Co  
(Name of Corporation)

**DOCUMENT NUMBER:** P10000081451

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bill Antar  
(Name of Person)

Cape Coral Tax &  
Accounting Services, L.L.C.  
3306 Del Prado Blvd. South  
Cape Coral, FL 33904

(City/State and Zip Code)

For further information concerning this matter, please call:

Bill Antar at ( 239 ) 540-7500  
(Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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, Bill Antar  
(Name of Registered Agent)

hereby resigns as Registered Agent for Marigold Construction and Repair CO  
(Name of Corporation)

P10000081451  
(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.

Bill Antar CPA  
(Signature of Resigning Agent)

If signing on behalf of an entity:

Bill Antar  
(Typed or Printed Name)

Outgoing Registered Agent  
(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