P10000087778

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Amendment Section TO: Division of Corporations

SUBJECT: IN N OUT DELIVERY SERVICES, INC.

(Name of Corporation)

DOCUMENT NUMBER: P10000087778

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:

JONATHAN WOGINIAK

(Name of Person)

IN N OUT DELIVERY SERVICES, INC

(Name of Firm/Company)

3440 HOLLYWOOD BLVD SUITE 415

(Address)

HOLLYWOOD, FL 33021

(City/State and Zip Code)

For further information concerning this matter, please call:

JONATHAN WOGINIAK at (786 (Area Code

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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



والمراسخ المهجرين

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, PAUL J LEWIS
(Name of Registered Agent)
hereby resigns as Registered Agent for IN N OUT DELIVERY SERVICES, INC.
(Name of Corporation)
P10000087778
(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:
PAUL J. LEWIS
(Typed or Printed Name)
(Capacity)
(Supucity)

\$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withdrawn corporation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

Fee for filing this document: