P100000 92244

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: ABC Painting INC	
(Name of Corpor DOCUMENT NUMBER: PP10000092244	ation)
The enclosed Resignation of Registered Agent for a Corpo	oration and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Angelina Terrero	_
(Name of Person)	
Kaba Consulting	
(Name of Firm/Company)	_
1655 East Highway 50 Ste.203	
(Address)	_
Clermont, FL 34711	
(City/State and Zip Code)	_
For further information concerning this matter, please call	:
Angelina Terrero at (Mame of Person) at (Area Coo	432-1053 de & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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. Kaba Consulting INC
hereby resigns as Registered Agent for ABC Painting INC (Name of Registered Agent) (Name of Corporation)
P1000092244
(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:
Angelina Terrero
(Typed or Printed Name)
(Typed or Printed Name) Firm Administrator
(Capacity)
(Capacity) Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation