(Requestor's Name) (Address)	10
(Address)	
(City/State/Zip/Phone #)	:
PICK-UP WAIT MAIL	
(Business Entity Name)	
(2200020 2000)	
(Document Number)	•
Certified Copies Certificates of Status	
Consideration to Filtra Office	
Special Instructions to Filing Officer:	
	_
	RIAR
	DEC 1 2014
	I R. WHITE

Office Use Only



0265741771

2/01/14--01016--027 **122.50

29

14 DEC - 1 PM 12:06

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Meats and More Inc. (Name of Corporation)
DOCUMENT NUMBER: P110000 72057
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:
Jessie T. Revels (Name of Person)
(Name of Firm/Company)
1412 71/Ga Highway
Havana Fl. 32333 (City/State and Zip Code)
For further information concerning this matter, please call:
Jessie Revels at (850) 445-4531 (Area Code & Daytime Telephone Number)
Delicity December of State for \$97.50 for an active as

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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, Jessie T. Revels (Name of Registered Agent)
hereby resigns as Registered Agent for Meats and More Inc, (Name of Corporation)
(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:
(Typed or Printed Name)
(Capacity) 日本

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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