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Division of Corporations

Fax Number : (850)617 6380

From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007 Phone : (702)866-2500 Fax Number : (702)866-2689

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

Email Address: wendy.hefley@incorp.com

REGISTERED AGENT RESIGNATION COIT SERVICES SOUTH FLORIDA, INC.

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\$35.00

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Help

COVER LETTER

TO:	Amendment Section
	Division of Corporations
SUBJ	ECT:COIT SERVICES SOUTH FLORIDA, INC.
	(Name of Corporation)
DOCU	JMENT NUMBER: P11000073970
The er	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
Wend	y Hefley
	(Name of Person)
Incorp	Services, Inc.
	(Name of Firm/Company)
<u>3773 (</u>	Howard Hughes Parkway, Suite 500S (Address)
Las V	egas, NV 89169-6014 (City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Wend	y Hefley for Incorp Services, Inc. at (702) 866-2500 ext 6904 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617	1.1509.
Florida Statutes, the undersigned, Incorp Services, Inc.	
(Name of Registered Agent)	
COIT SERVICES SOUTH FLORIDA, IN	C.
hereby resigns as Registered Agent for	
(Name of Corporation)	
P11000073970	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known	own address.
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed. InCorp Services, Inc.	on which
matter of the second of the se	
(Signature of Resigning Agency) If signing on behalf of an entity:	200 M
	MAY 27
Wendy Hefley	T==
(Typed or Printed Name)	AH 9:
Authorized Representative on behalf of Incorp Services, Inc.	37 37
(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
Tallahassec, FL 32314