P120000022939

(Re	equestor's Name)			
(A	ddress)			
(A	ddress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
· (8	usiness Entity Nar	me)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



100310875951

03/26/18--01031--008 **522.50



RARES

MAR 2 8 2018 I ALBRITTON

COVER LETTER

TO:	Amendment Section Division of Corporations		
SUBJ	Golden Triangle Storage, In		
DOC	() P1200002293 UMENT NUMBER:	Name of Corpora 39	tion)
The e	nclosed Resignation of Registered Ag	gent for a Corpo	ration and fee are submitted for filing.
Please	return all correspondence concernin	g this matter to	the following:
Regi	nald G. Stambaugh		
	(Name of Person)		_
Stam	baugh Law Firm		
	(Name of Firm/Company)		_
224 [Datura Street, Suite 1001		
	(Address)		_
West	Palm Beach, Florida 33401		
	(City/State and Zip Code)		
For fu	orther information concerning this ma	itter, please call:	
Regi	nald G. Stambaugh	561 at (832-0272
	(Name of Person)	(Area Cod	e & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the	ne provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.	1509,
Florida Statute	tes, the undersigned,	
	(Name of Registered Agent)	
hereby resigns	Golden Triangle Storage, Inc. s as Registered Agent for	
neres y resigni	(Name of Corporation)	
P120000229	939	
(Docum	nent Number, if known)	
A copy of this	s resignation was mailed to the above listed corporation at its last know	wn address.
The agency is this statement	s terminated and the office discontinued on the 31st day after the date of the filed. (Signature of Resigning Agent)	on which
If signing on h	behalf of an entity:	
	Reginald G. Stambaugh	
	(Typed or Printed Name)	_
	President	2018 N
	(Capacity)	AR 26
	Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved	PM 4: 2

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

withdrawn corporation