P12000057267

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
J. HORNE FEB 1 5 2024			

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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	Fred Davis Inc	
J J	(Name of Corpora	tion)
DOC	JMENT NUMBER: P12000057267	
The e	nclosed Resignation of Registered Agent for a Corpor	ration and fee are submitted for filing.
Pleas	return all correspondence concerning this matter to	he following:
Fred L	avis	
	(Name of Person)	_
Fed D	vis Inc	
	(Name of Firm/Company)	-
11324	Wiles RD	
	(Address)	-
Coral	Springs FL 33065	
	(City/State and Zip Code)	_
For fu	rther information concerning this matter, please call:	
KC Ca	ldwell 954 at (5852216) c & Daytime Telephone Number)
	(Name of Person) (Area Cod	& 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 AGENTS FOR A CORPORATION

Florida Statutes, the undersigned,	KC Caldwell
	(Name of Registered Agent)
hereby resigns as Registered Agen	Fred Davis Inc
was any reasigned as a registrate a region	(Name of Corporation)
P12000057267	
(Document Number, if known)	
A copy of this resignation was ma	iled to the above listed corporation at its last known address.
The agency is terminated and the o	office discontinued on the 31st day after the date on which
	office discondinged on the 31st day after the date on which
	Call
	(Signature of Resigning Agent)
this statement is filed. If signing on behalf of an entity:	Call
this statement is filed.	Call
this statement is filed.	Call

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)