## P13000048079

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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RA Resignation

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## **COVER LETTER**

Division of Corporations				
SUBJECT: Amateur Mixed Martial Art	ts Inc.			
(Name of Corporat		!		
DOCUMENT NUMBER: P13000048079			•	
The enclosed Resignation of Registered Agent for a Corpora	ation and fee are submitted for	filing.		
Please return all correspondence concerning this matter to the	he following:			
Anne Herstol				
(Name of Person)	•			
Prince CPA Group				
(Name of Firm/Company)	-			
9161 Narcoossee Road Ste 202	2e •			
(Address)	•	a de	عيس	•
Orlando, FL 32827		に見	8 NO	-71
(City/State and Zip Code)			2	AND SECTION AND SECTION ASSESSMENT AND SECTION ASSESSMENT ASSESSME
For further information concerning this matter, please call:		100 miles 100 miles	)jjjas	
Anne Herstol at (407 (Area Code	823-8230 & Daytime Telephone Number)	المام ا	10:1	E parame
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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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

TO: Amendment Section

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, Keith Buescher
(Name of Registered Agent)
hereby resigns as Registered Agent for Amateur Mixed Martial Arts Inc.
(Name of Corporation)
P13000048079
(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.
Keich Buch
(Signature of Resigning Agent)
If signing on behalf of an entity:
Ke. Hh Bueschen (Typed or Printed Name)
(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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
Tallahassee, FL 32314