P13000078774

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	#)
	_	_
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Do	cument Number)	
,	,	
Certified Copies	Certificates	of Status
Certified Copies	_ Certificates	Or Status
		 -
Special Instructions to I	Filing Officer:	





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COVER LETTER

Division of Corporations
SUBJECT: Dave'S Flect Services Group, The (Name of Corporation)
DOCUMENT NUMBER: P1200078774
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:
Glenda Sandhouse (Name of Person)
Averson + Smanase P.A. (Name of Firm/Company)
EOGA Oval Ridge Drive (Address)
COYO SOVINGS F. 3207/ (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (954), 752-870 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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:

TO: Amendment Section

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 61	7.1509,		
Florida Statutes, the undersigned. A Charles (Name of Registered Agent)	<u> </u>		
hereby resigns as Registered Agent for DNC'S Flock SWX (Name of Corporation)	ES (Sra	D.Ih
DISONOS 774 (Document Number, if known)			
A copy of this resignation was mailed to the above listed corporation at its last k	nown ad	ldress.	
The agency is terminated and the office discontinued on the 31st day after the da this statement is filed. (Signature of Resigning Agent)	te on who SECREDAY	ich 2020 JAN 2	
If signing on behalf of an entity: (Typed or Printed Name)	SSEE, FL	PH 4:	
(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withdrawn corporation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