

**P14 000044882**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

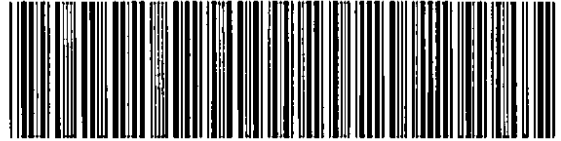
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



**500348681875**

07/23/20--01006--006 \*\*87.50

**RECEIVED**

**JUL 14 2020**

S F A I L  
AUG 27 2020

2020 JUL 14 AM 9:39

*RIA-Resign*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Aquapresen Cosmetiks USA, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** P14000044882

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:

Marena Loeffler

(Name of Person)

Allure Accounting, Inc.

(Name of Firm/Company)

3665 Bonita Beach Road, Suite 1 -3

(Address)

Bonita Springs, FL 34134

(City/State and Zip Code)

For further information concerning this matter, please call:

Marena Loeffler

at (239) 992-3355

(Name of Person)

(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 617.1509,

Florida Statutes, the undersigned, Allure Accounting Inc.

(Name of Registered Agent)

hereby resigns as Registered Agent for Aquapresen Cosmetiks USA, Inc.

(Name of Corporation)

P14000044882

(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.



(Signature of Resigning Agent)

If signing on behalf of an entity:

Marena Loeffler

(Typed or Printed Name)

President of Allure Accounting, Inc.

(Capacity)

2020 JUL 14 AM 9:39

**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**