

P14000051508

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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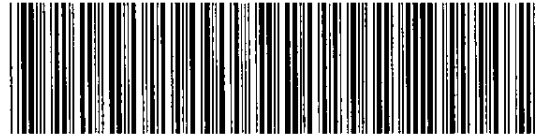
(Business Entity Name)

(Document Number)

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MAY 14 2017
17 11:14 PM 3:00

Ra Resignation

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AGRO INNOVA CO
(Name of Corporation)

DOCUMENT NUMBER: P 14 000051508

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:

JOSEPH W MONTGOMERY III
(Name of Person)

(Name of Firm/Company)

2700 GLADES CIRCLE STE 149
(Address)

WESTON FL 33327
(City/State and Zip Code)

For further information concerning this matter, please call:

JOSEPH MONTGOMERY at (954) 258 3994
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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
Tallahassee, FL 32314

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DEPT. OF STATE
DIV. OF CORPORATIONS
17 JUL 14 PM 3:00

**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, MONTGOMERY, JOSEPH W, III
(Name of Registered Agent)

hereby resigns as Registered Agent for AGRO INNOVA CO.
(Name of Corporation)

P14000051508
(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.

Joseph Montgomery
(Signature of Resigning Agent)

If signing on behalf of an entity:

(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withdrawn corporation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

17 JUL 16 PM 3:00
FILED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA