P15000000 840

(Requestor's Name)
(Address)
(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:

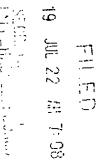




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07/22/19--01025--023 **35.00

S. YOUNG



COVER LETTER

Division of Corporations	
_{SUBJECT:} North Florida Castaway C	ustoms, Inc.
(Name of Corporati	on)
DOCUMENT NUMBER: P15000002840	
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	ne following:
United States Corporation Agents, Inc.	
(Name of Person)	
Legalzoom.com, Inc.	
(Name of Firm/Company)	
9900 Spectrum Dr.	
(Address)	
Austin, TX 78717	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Janna Pantoja at (800	773-0888 x3950 & Daytime Telephone Number)
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

TO: Amendment Section

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

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Pursuant to the	provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.	1509,	
Florida Statutes	es, the undersigned, United States Corporation Agents, Inc.		
(Name of Registered Agent)			
hereby resigns a	ns Registered Agent for North Florida Castaway Custo	ms, Inc.	
	(Name of Corporation)		
P1500000	02840		
(Documer	nt Number, if known)		
A copy of this r	esignation was mailed to the above listed corporation at its last kno	wn address.	
The agency is to this statement is	erminated and the office discontinued on the 31st day after the date s filed. (Signature of Resigning Agent)	्रा राज्याः क	
If signing on be	half of an entity:	JUL 22	
	Cheyenne Moseley	· · · · · · · · · · · · · · · · · · ·	
	(Typed or Printed Name)	7: 08	
	Assistant Secretary, on behalf of Untied States Corporation Agents, Inc.		
	(Capacity)		

<u>Fee for filing this document:</u> \$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