P15000012422

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	Idress)	
(Ci	ty/State/Zip/Phone	> #)
PICK-UP	WAIT	MAIL.
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	-
		ı

Office Use Only



300277344893

09/24/154-01008--013 **35.00

11/02/15--01029--001 **52.50

resignation of



NOV 0 4 2015 A RAMSEY

X00678,00671



September 30, 2015

David Frank Leal PA Keyes Company 1313 Torrington Ave Wellington, FL 33414

SUBJECT: DAVID FRANK LEAL, PA

Ref. Number: P15000012422

We have received your document for DAVID FRANK LEAL, PA and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$52.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 815A00020660

Annette Ramsey Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	Remove Registered Agent
	(Name of Corporation) UMENT NUMBER: P15000012422
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
Da	vid Frank Leal PA (Name of Person)
Ke	yes Company (Name of Firm/Company)
13 ⁻	13 Torrington Avenue
We	elliongton, FL. 33414
For fu	(City/State and Zip Code) urther information concerning this matter, please call:
Da	vid Leal at (561) 301-0116 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

RESIGNATION OF REGISTERED AGENT FILED FOR A CORPORATION 2015 NOV -2 PM 12: 52

SPURE VOCE FLORIDA
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned. Company Corporation
(Name of Registered Agent)
hereby resigns as Registered Agent for David Frank Leal PA
(Name of Corporation)
P15000012422
(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.
Carried Frank Land PA (Signature of Resigning Agent)
If signing on behalf of an entity:
David Frank Leal PA
(Typed or Printed Name)
Director
(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