P15000019751

| (Re | questor's Name) | | |
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| (Ad | dress) | | |
| (Ad | dress) | | |
| (Cit | y/State/Zip/Phon | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Bu | siness Entity Nar | me) | |
| (Document Number) | | | |
| Certified Copies | _ Certificate: | s of Status | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only



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RA resignation

02/26/16--01014--022 **87.50



A RAMSEY

COVER LETTER

| TO: | Amendment Section Division of Corporations |
|--------|--|
| SUBJ | Weston Compass Investments Corporation |
| DOC | (Name of Corporation) JMENT NUMBER: P15000019751 |
| The e | closed Resignation of Registered Agent for a Corporation and fee are submitted for filing. |
| Please | return all correspondence concerning this matter to the following: |
| Boi | nnie Yerry |
| | (Name of Person) |
| COI | RPORATION SERVICE COMPANY |
| | (Name of Firm/Company) |
| 80 | STATE STREET |
| | (Address) |
| AL | BANY NY 12207 |
| | (City/State and Zip Code) |
| For fu | ther information concerning this matter, please call: |
| Bo | nnie Yerry _{at (} 800 ₎ 927-8901 ex63002 |
| | (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION 15 FEB 26 PM 2: 45

| | SPORETARY OF STATE. | |
|---|--|--|
| Pursuant to the provisions of section | SECRETARY OF STATE ons 607.0502(2), 617.0502(2), 607.150列衛星信利許多等E. FLORIDA CORPORATION SERVICE COMPANY | |
| Florida Statutes, the undersigned, | CORPORATION SERVICE COMPANY | |
| | (Name of Registered Agent) | |
| hereby resigns as Registered Agent for Weston Compass Investments Corpo | | |
| | (Name of Corporation) | |
| P15000019751 | | |
| (Document Number, if known) | | |
| A copy of this resignation was mai | led to the above listed corporation at its last known address. | |
| The agency is terminated and the o | ffice discontinued on the 31st day after the date on which | |

(Signature of Resigning A)

If signing on behalf of an entity:

Bonnie Yerry
(Typed or Printed Name)

Asst. Secretary (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