P15000041526

•
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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SECRETARY OF STATE

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Resignation of Registered Agent for a Corporation

Capitol Corporate Services, Inc.

PO Box 1831 Austin, TX 78**767**

Phone. 800-345-4647 Fax 800-432-3622

regagent@capitolservices.com

1,4

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 DATE: STATE: 5/14/2018 FLORIDA

REP UNIT:

PAH 6, INC.

Enclosed for filing please find a Resignation of Registered Agent for a Corporation for the above referenced name, which is to be filed in your office. Enclosed is check # 30045 in the amount of 87.50 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call 800-345-4647 and ask for the Registered Agent Department.

Please return file-stamped copy to the following address:

Capitol Corporate Services, Inc. PO Box 1831 Austin, TX 78767

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: PAH 6, INC. (Name of Corporation)
DOCUMENT NUMBER: P15000041526
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:
Casey Bice (Name of Person)
Capitol Services Registered Agent Department (Name of Firm/Company)
PO Box 1831 (Address)
Austin, TX 78767 (City/State and Zip Code)
For further information concerning this matter, please call:
Casey Bice at (800) 345-4647 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of section	ons 607.0502(2), 617.0502(2), 607.1509, or 617.	1509,	
Florida Statutes, the undersigned,	Capitol Corporate Services, Inc. (Name of Registered Agent)		
hereby resigns as Registered Agen	t for PAH 6, INC. (Name of Corporation)		
P15000041526 (Document Number, if known)			
A copy of this resignation was mai	iled to the above listed corporation at its last kno	wn address.	
The agency is terminated and the countries statement is filed.	office discontinued on the 31st day after the date	on which	
If signing on behalf of an entity:	(Signature of Resigning Agent)	2018 MAY SECRE TO TALLAHA	<u> </u>
	Jason Fischer (Typed or Printed Name)	IT .	
	Assistant Secretary	AM IO: (1 Nº STATE . FLORID	D

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

(Capacity)