φ (S)



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000202589 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

т.	_	_

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : Ala REGISTERED AGENT INC.

Account Number : 120090000032

Phone : (561)792-2236

Fax Number

: (561)202-8082

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Ema		نہ نہ	 _	_	_

REGISTERED AGENT RESIGNATION M&L TILE SOLUTION CORP.

Certificate of Status	0	
Certified Copy	0	
Page Count	01	
Estimated Charge	\$87.50	

Electronic Filing Menu Corporate Filing Menu

Help

H2000202589 3

RESIGNATION OF REGISTERED AGENT AT 9: 52 FOR A CORPORATION

Pursuant to the provisions of sect	ions 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	
,	(Name of Registered Agent)
hereby resigns as Registered Age	nt for
, <u> </u>	(Name of Corporation)
P15000055331	
(Document Number, if known)	
A copy of this resignation was ma	ailed to the above listed corporation at its last known address.
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the date on which
	(Signature of Resigning Agent)
If signing on behalf of an entity:	
TINA MAKI	
	(Typed or Printed Name)
DP	
	(Canacity)

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

CR2E046 (12/19)

H200002025893