

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fak Number

:: (850)617-6380

Account Name

: INCORPORATING SERVICES FL

Account Number : I20050000052 Phone

: (850)656-7956

Fax Number

: (650)656~7953

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Email Address:

## REGISTERED AGENT RESIGNATION THILMAN INC.

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: THILMAN IN	
DOCUMENT NUMBER: P160	(Name of Corporation) 00061325
The enclosed Resignation of Regis	tered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence co	oncerning this matter to the following:
Tunisha Scott	
(Name of Per	son)
INCORPORATING SER	(ICES, LTD.
(Name of Firm/C	ompany)
3500 S DUPONT HWY	
(Address)	
DOVER, DE 19901	
(City/State and Zi	p Code)
For further information concerning	this matter, please call:
Tunisha Scott	at (800 ) 346-4646
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check made payable to or \$35.00 for an administratively di	to the Florida Department of State for \$87.50 for an active corporation issolved, voluntarily dissolved or withdrawn corporation.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

CR2E046 (04/12)

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## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, INCORPORATING SERVICES, LTD.
(Name of Registered Agent)
hereby resigns as Registered Agent for THILMAN INC.
(_value of Corporation)
P16000061325
(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.
(Signature of Resigning Agent)
If signing on behalf of an entity.
Tunisha Scott
(Typed or Printed Name)
ASSISTANT SECRETARY
(Capacity)
lacksquare
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withdrawn corporation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