## P160000 73518

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	_
	\$35.00	_

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S. TALLENT DEC 1 4 2018

IRIA, Resign

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Furniture Deals Florida Inc.
(Name of Corporation)  DOCUMENT NUMBER: P16000073518
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:
Kent Rockwell
(Name of Person)
Universal Registered Agents, Inc.
(Name of Firm/Company)
PO Box 23788
(Address)
Overland Park, KS 66283
(City/State and Zip Code)
For further information concerning this matter, please call:
Kent Rockwell at (855)236-9172 (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 co

corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 sections 607.0502(2), 617.0502(2), 607.1509, or 617.	1509,
Florida Statutes, the undersigned, Universal Registered Agents, Inc.	
(Mille of Registered rigoss)	
hereby resigns as Registered Agent for Furniture Deals Florida  (Name of Corneration)	Inc.
hereby resigns as Registered Agent for (Name of Corporation)	
P16000073518	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last know	wn address.
The agency is terminated and the office discontinued on the 31st day after the date of this statement is filed.	on which
(Signature of Resigning Agent)	76
If signing on behalf of an entity:	FILED PH 1:8
Kent Rockwell	PH 1:3
(Typed or Printed Name)	
	Ē 😛
CEO	<u>.                                    </u>
(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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