

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

: (850)617-6380 Fax Number

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 Phone : (702)866-2500

Fax Number : (702)866-2689

**Enter the email address for this business entity to be used for futureannual report mailings. Enter only one email address please: **

REGISTERED AGENT RESIGNATION MONARC GROUP, INC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section Division of Corporation		•
SUBJECT: MONAF	RC GROUP, INC	
	(Name of Corpo	oration)
DOCUMENT NUMBER	<u>: P16000093664</u>	
The enclosed Resignation	of Registered Agent for a Corp	poration and fee are submitted for filing.
Please return all correspon	dence concerning this matter t	o the following:
Wer	ndy Hefley	· ·
(Na	me of Person)	
Incorp 5	Services, Inc.	
(Name o	f Firm/Company)	_
3773 Howard Hugh	nes Parkway, Suite 5009	5
	Address)	
Las Vegas,	NV 89169-6014	
(City/Sta	ate and Zip Code)	_
For further information co	ncerning this matter, please cal	U:
Wendy Hefley for Incor	p Services, Inc. at (702	866-2500 ext. 6904
(Name of Pe	rson) (Area Co	ode & Daytime Telephone Number)
Enclosed is a check made or \$35.00 for an administra	payable to the Florida Departm atively dissolved, voluntarily d	eent of State for \$87.50 for an active corporations issolved or withdrawn corporation.
Street Address:	Mailing Address:	

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Locardit to the broadslous of sections 60	77.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, Incom	rp Services, Inc.	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	MONARC GROUP, INC	
nerena resigns as wedistered Wheth for -	(Name of Corporation)	
P16000093664		
(Document Number, if known)	-	
A copy of this resignation was mailed to	the above listed corporation at its last known add	lress
this statement is filed	discontinued on the 31st day after the date on whi	th 2019 AUG
(Sig	nature of Resigning Agent)	AUG -
If signing on behalf of an entity:		On §
Wendy Hef	ley min	
(1	(yped or Printed Name)	AH 10: 15
Authorized Representa	ative on behalf of Incorp Services, Inc.	
	(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