

P170000631077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

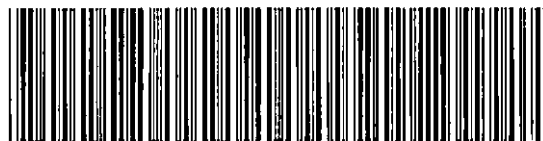
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Walk in \$87.50

Office Use Only



400320262274

S TALL FMT
NOV 01 2018

RECEIVED
CLERK OF SUPERIOR COURT
18 OCT 31 AM 10:38

R/A-Resign

FILED
CLERK OF SUPERIOR COURT
18 OCT 31 AM 9:41

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 10/30/2018

NAME: CALLAHAN BROTHERS INC

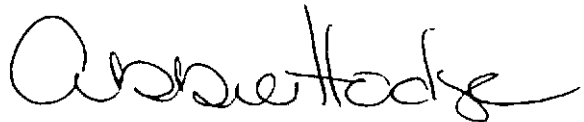
TYPE OF FILING: REGISTERED AGENT RESIGNATION

COST: 85.00 87.50

RETURN:

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



**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, FLORIDA FILING & SEARCH SERVICES, INC.
(Name of Registered Agent)

hereby resigns as Registered Agent for CALLAHAN BROTHERS, INC.
(Name of Corporation)

P17000031077

(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:

ABBIE HODGE

(Typed or Printed Name)

SECRETARY

(Capacity)

FILED
18 OCT 31 AM 9:01
TALLAHASSEE, FL

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withdrawn corporation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**