# P17000079738

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Daywood Nambor)		
(Document Number)		
Certified Copies Certificates of Status		
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#### **COVER LETTER**

Division of Corpo	
Your Home Wor SUBJECT:	
<del></del>	(Name of Corporation)
DOCUMENT NUMBER	P17000079738
The enclosed Resignation	of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspo	ndence concerning this matter to the following:
Kristin A. Plantrich	
(Na	me of Person)
Your Home Works Inc	
(Name	of Firm/Company)
5927 Pavilion Drive	
	(Address)
Jacksonville, FL 32258	
(City/S	ate and Zip Code)
For further information ed	oncerning this matter, please call:
Kristin A Palntrich	at (248 627=2624 (Area Code & Daytime Telephone Number)
	Person) (Area Code & Daytime Telephone Number)

## **Mailing Address:**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### **Street Address:**

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

# RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, o	r 617.1509,
Florida Statutes, the undersigned, Donald W. Trednick, III	
(Name of Registered Agent)	
hereby resigns as Registered Agent for Your Home Works Inc	
(Name of Corporation)	
P17000079738	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its la	
The agency is terminated and the office discontinued on the 31st day after the	e date on which
this statement is filed.	
Dadle Trebat HA	
(Signature of Resigning Agent)	
If signing on behalf of an entity:	
Donald W. TREDNICE THE (Typed or Printed Name)	26191
(Typed of Timed Talme)	,
	1
(Capacity)	***************************************
(Sulvacity)	<u> </u>
	/ 110: 1:2
Fee for filing this document:	
(\$87.50) Active Corporation	
\$35.00 - Administratively dissolved/voluntarily di	.ssolved/

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation