P18000013218

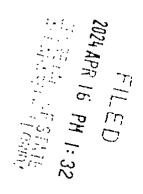
(Requestor's Name)				
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COVER LETTER

	Iment Section on of Corporations		
SUBJECT:)-H2O FRANCHISING, INC.		
	(Name of Corporat	ion)
DOCUMENT	NUMBER: P18000013278		
The enclosed	Resignation of Registered Ag	gent for a Corpora	ation and fee are submitted for filing
Please return a	all correspondence concernin	g this matter to the	he following:
Nicole M. Ciova	eco, Esq.		
	(Name of Person)		-
The Law Office	of Nicole M. Ciovacco, PLLC		
	(Name of Firm/Company)		-
1760 SW 30th P	lace		
	(Address)		•
Fort Lauderdale.	Florida 33315		
	(City/State and Zip Code)		-
For further inf	ormation concerning this ma	tter, please call:	
Nicole M. Ciova	eco	954 at (980-4121
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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 section	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	Nicole M. Ciovacco, Esq.
. Who survives, the undership ted,	(Name of Registered Agent)
hereby resigns as Registered Agent	NO-H2O FRANCHISING, INC.
nereby resigns as registered Agent	(Name of Corporation)
P18000013278	
(Document Number, if known)	
A copy of this resignation was mai	led to the above listed corporation at its last known address.
The agency is terminated and the othis statement is filed.	iffice discontinued on the 31st day after the date on which
_	/MI
	(Signature of Resigning Agent)
If signing on behalf of an entity:	
	(Typed or Printed Name)
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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