# PIS COCO 91325

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
Tim 4/16/21		





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#### **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Assured Transport Inc	
(Name of Corporat	tion)
DOCUMENT NUMBER: P18000090328	•
The enclosed Resignation of Registered Agent for a Corpor	ation and fee are submitted for filing
Please return all correspondence concerning this matter to the	
Keith J. Breading	
(Name of Person)	
Assured Transport Inc	
(Name of Firm/Company)	
5304 1st Ave N	
(Address)	
St Petersburg, Florida 33710	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Keith J. Breading 727	743 5727
	& 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 sections 607.0	503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	Keith J. Breading
·	(Name of Registered Agent)
hereby resigns as Registered Agent for	Assured Transport Inc
	(Name of Corporation)
P18000090328	
(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 disc this statement is filed.	entinued on the 31st day after the date on which
If signing on behalf of an entity:	Corresigning Agent)
(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\$35.00 - Administratively dissolved/voluntarily dissolved/withdrawn corporation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