# P19000033312

(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:				

Office Use Only



800393285648

09/12/22--01025--008 \*\*87.50

21127 SEP 12 Ail 11: 16

DEC 13 2022 S. PRATHEF

### **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJE	LDIT INC.
0020	(Name of Corporation)
DOCU	MENT NUMBER: P19000032312
The end	closed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
Sierra C	ampos
	(Name of Person)
First Co	rporate Solutions Inc
	(Name of Firm/Company)
914 S S	
	(Address)
Sacrame	ento CA 95811
	(City/State and Zip Code)
For fur	ther information concerning this matter, please call:
Sierra C	
	(Name of Person) at (

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 sect	ions 607.0503(2), 617.0502(2), 607.1509, or 6	17.1509,
Florida Statutes, the undersigned, FIRST CORPORATE SOLUTIONS, INC.  (Name of Registered Agent)		
, , ,	(Name of Corporation)	-
P19000032312		
(Document Number, if known)		
	ailed to the above listed corporation at its last lost office discontinued on the 31st day after the d	
	(Signature of Resigning Agent)	70EE
If signing on behalf of an entity:		
Sierra Campos	(Typed or Printed Name)	ANTIE 16 STRLOMD?
Assistant Secretary	y.	· · · · · ·
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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
Tallabassee, FL 32314