## P200000H1167

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<del></del>
V		
(Cit	y/State/Zip/Phon	e #)
<b>—</b>		<b>—</b>
☐ PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
·	•	•
(DC	cument Number	
Certified Copies	_ Certificate	s of Status
Considerations to	Cities Officer	
Special Instructions to	Filing Officer:	
<u> </u>		21/2/21

Office Use Only



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10/04/21--01025--007 \*\*35.00

2021 OCT -4 PM 2: 52 SECRETARY OF STATE TALLAHASSES FL

## **COVER LETTER**

Division of Corporations
SUBJECT: Route Africa Travel and Tours Corp.
(Name of Corporation)
DOCUMENT NUMBER: P20000041167
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
United States Corporation Agents, Inc.
(Name of Person)
Legalzoom.com, Inc.
(Name of Firm/Company)
9900 Spectrum Dr.
(Address)
Austin, TX 78717
(City/State and Zip Code)
For further information concerning this matter, please call:
800 <sub>773-0888</sub>
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

TO: Amendment Section

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

FILED

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION 2021 OCT -4 PM 2: 52

Pursuant to the provisions of section	SECRETARY OF STATE ons 607.0502(2), 617.0502(2), 607.1509, or 617.1509, United States Corporation Agents, Inc.
Florida Statutes, the undersigned,	United States Corporation Agents, Inc.
<del></del>	(Name of Registered Agent)
hereby resigns as Registered Agen	t for Route Africa Travel and Tours Corp.
	(Name of Corporation)
P20000041167	
(Document Number, if known)	<del></del>
A copy of this resignation was mai	led 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:

Cheyenne Moseley

(Typed or Printed Name)

Asst. Secretary for United States Corporation Agents, Inc.

(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