# P20000033452

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
		ĺ
		ĺ
		1

Office Use Only



100370366381

03/20/21--01037--002 \*\*2135.00

ECRETARY OF BEGGE TALLABY SSECTE

#### **COVER LETTER**

T 9 M Laura Caninana 9 Ma	va taa
SUBJECT: T & M Lawn Services & Mo	(Name of Corporation)
	(Name of Corporation)
DOCUMENT NUMBER: P2000008	3452
The enclosed Resignation of Registe	ered Agent for a Corporation and fee are submitted for filing
Please return all correspondence con	ncerning this matter to the following:
reaso retain an correspondence con	rectining this matter to the following.
Robert J. Neary, Esq.	
(Name of Perso	on)
Kozyak Tropin & Throckmorton	
(Name of Firm/Cor	mpany)
2525 Ponce de Leon, Blvd., 9th Floor	
(Address)	
Coral Gables, FL 33134	
(City/State and Zip	Code)
For further information concerning t	his matter, please call:
Robert J. Neary	at ( 305 ) 372-1800
(Name of Person)	(Area Code & Daytime Telephone Number)

ation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 provis	ions of sectio	ns 607.0503(2), 617.0502(2), 607.	1509, or 617.1:	509,	
Florida Statutes, the u	ndersigned,	MJ Taxes and More			
·	<b>U</b> , -	(Name of Registere	d Agent)		
hereby resigns as Reg	istered Agent	for T & M Lawn Services & More, Inc			
noredy realigns as reeg	iotorou / tgoint	(Name of Corpor			
P20000083452					
(Document Numb	er, if known)				
A copy of this resigna	tion was mail	ed to the above listed corporation	at its last know	n addro	ess.
The agency is termina this statement is filed.		Ffice discontinued on the 31st day	after the date or	ı whicl	h
		(Signature of Resigning Agent)		20:	
If signing on behalf of	an entity:		CRETAL PALL ST	2021 OCT	(
Cora	li Lopez-Castro,	Esq.		<del>2</del> ⊘	<u></u>
		(Typed or Printed Name)	71 _1 71 _1 77 71 _24	PM 2: 13	المناشد. 1- 2: هذ
Cou	rt-appointed Red	eiver for MJ Taxes and More	,		
		(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