P22-000041887

(Requestor's Name)
(Address)
(Hadicas)
(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



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2024 JAN -4 MH II: 07 SECRETARY OF STATE TALL MISSESSES FL

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RECEIVED

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM Me

Melissa Moreau mmoreau@incserv.com

850.656.7953

REQUEST DATE 01/03/2024

ORDER ENTITY

OCEAN SHORE DESIGNS, INC.

PRIORITY Routine

OUR REF # (Order ID#) W

PLEASE PERFORM THE FOLLOWING SERVICES:

OCEAN SHORE DESIGNS, INC.

Please file the attached resignation.

NOTES:

\$35.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: OCEAN SHORE DESIGNS, IWC. (Name of Corporation)	
(Name of Corporation)	
DOCUMENT NUMBER: P22000041887	
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:	
Westley Look (Name of Person)	
Westley Look (Name of Person) Incorporating Services, Ltd. (Name of Firm/Company) 3500 S DuPont Hughway	4.50 1.31 1.31 1.31 1.31
3500 S DuPont Hughway (Address)	
Dover, DE 19901 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Westley Look (Name of Person) at ((Area Code & Daytime Telephone Number)	
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active of the control of	orpora

ition or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Incorporating Services, Ltd.
Florida Statutes, the undersigned, Incorporating Services, Ltd. (Name of Registered Agent)
hereby resigns as Registered Agent for OCEAN SHORE DESIGNS, INC. (Name of Corporation)
hereby resigns as Registered Agent for (Name of Corporation)
(Name of Corporation)
P22000041887
(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 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:
If signing on behalf of an entity:
- A A (1 14 M* C C C C C C C -
(Typed or Printed Name)
Assistant Secretary
(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