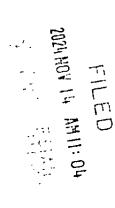
P22000080817

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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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

Melissa Moreau mmoreau@incserv.com 850.656.7953

٠.,	RE	Q	UES	T DATE	11/	/12/2	2024

850-245-6051

PRIORITY Routine

OUR REF # (Order ID#) Westley

ORDER ENTITY

CRS AUTOMOTIVE PARTS OF FLORIDA, INC.

PLEASE PERFORM THE FOLLOWING SERVICES:	
CRS AUTOMOTIVE PARTS OF FLORIDA, INC.	
Please file the attached resignation.	
NOTES:	
\$87.50 Authorized	
RETURN/FORWARDING INSTRUCTIONS: ACCOUNT NUMBER: 120050000052	· •
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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.

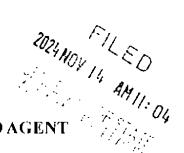
COVER LETTER

SUBJECT: CRS AUTOMOTIVE PARTS OF FLORIDA, INC. (Name of Corporation) DOCUMENT NUMBER: P22000080817 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) Incorporating Services, Ltd. (Name of Firm/Company) 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) (Name of Person) (Name of Person) (Name of Person)	FO: Amendment Section Division of Corporations	
(Name of Corporation) DOCUMENT NUMBER: P22000080817 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) Incorporating Services, Ltd. (Name of Firm/Company) 3500 S DuPont Hughway (Address) Dover, DE 19901 (City/State and Zip Code) For further information concerning this matter, please call:	SUBJECT: CRS AUTOMOTIVE PARTS OF FLORIDA, INC.	
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Dover, DE 19901 (City/State and Zip Code) For further information concerning this matter, please call:	3500 S DuPont Hughway	
(City/State and Zip Code) For further information concerning this matter, please call:	(Address)	
For further information concerning this matter, please call:	Dover, DE 19901	
	(City/State and Zip Code)	
Westley Look (Name of Person) at (302) 531-0703 (Area Code & Daytime Telephone Number)	For further information concerning this matter, please call:	
(Name of Person) (Area Code & Daytime Telephone Number)	Westley Look 302 531-0703	
Participated and the state of the participated and the state of the st		

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
Taliahassee, 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,
Florida Statutes, the undersigned, Incorporating Services, Ltd.
(Name of Registered Agent)
hereby resigns as Registered Agent for CRS AUTOMOTIVE PARTS OF FLORIDA, INC
(Name of Corporation)
P22000080817
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known addres
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.
1 Syry (Ca to) Cryy & Clutter (Signature of Resigning Agent)
If signing on behalf of an entity:
Amanda Archambault
(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