# P23000033795

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#### **COVER LETTER**

Division of Corporations		
Dean Roofing & Construction inc. SUBJECT:		
	(Name of Corpo	oration)
DOCUMENT NUMBER: P23000033795		
The enclosed Resignation of Registered A	gent for a Corp	poration and fee are submitted for filing.
Please return all correspondence concernir	ng this matter t	to the following:
Justin Dean		
(Name of Person)		<del></del> -
Dean Capital Group, inc.		
(Name of Firm/Company)	)	<del></del>
2030 Royal Oak Ct		
(Address)		<del></del> -
Orlando, FL 32836		
(City/State and Zip Code)		<del></del>
For further information concerning this ma	atter, please cal	H:
Justin Dean	407 at (	271-9466
(Name of Person)	(Area Co	271-9466 ) ode & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

### **Mailing Address:**

TO: Amendment Section

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 section	is 607.0503(2), 617.0502(2), 607.1	1509, or 617.1	.509,
Florida Statutes, the undersigned, $\frac{J}{L}$	orge Gomez		
	(Name of Registered	l Agent)	
hereby resigns as Registered Agent	Por Dean Roofing & Construction inc.		
nereby resigns as registered Agent	(Name of Corpora		
P23000033795			
(Document Number, if known)			
A copy of this resignation was mail-	ed to the above listed corporation a	nt its last knov	vn address
The agency is terminated and the of	fice discontinued on the 31st day a	after the date o	on which
this statement is filed.		2023	
<u></u>		2023 OUT	• n
	(Signature of Resigning Agent)		••
If signing on behalf of an entity:			
			- معد
Jarge Gomez		16	
<u></u>	(Typed or Printed Name)		
Registered Agent -	Manager (MCP)		
registered Agent -	(Capacity)	<del></del>	
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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