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COVER LETTER

	Amendment Section Division of Corporations
SUBJ	VETERANS PLUMBING AND WATER TREATMENT OF TAMPA BAY JUNG.
	(Name of Corporation)
DOC	UMENT NUMBER: P23000047198
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Pleas	e return all correspondence concerning this matter to the following:
CHRI	STOPHER LAW
	(Name of Person)
VETE	RANS PLUMBING AND WATER TREATMENT OF TAMPA $_{j}$ \mathcal{IOC} .
	(Name of Firm/Company)
1291 8	MASADA LN
	(Address)
SPRIN	NG HILL FL 34608
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
CHRI	STOPHER LAW 352 7735966 at ()
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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 provisions of sections 60	07.0503(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, CHRI	ISTOPHER W LAW	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	VETERANS PLUMBING AND WATER TREATMENT OF TAMP (1)	Inc
nereby resigns as Registered Agent for	(Name of Corporation)	
P23000047198		
(Document Number, if known)		
A copy of this resignation was mailed to	o the above listed corporation at its last known address.	
this statement is filed.	discontinued on the 31st day after the date on which	
(Sig	gnature of Resigning Agent)	
If signing on behalf of an entity:	gnature of Resigning Agent)	
Christo	(Typed or Printed Name)	
Pre	251U4V1	
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

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