723000058626

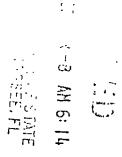
(Requestor's Name)
(Address)
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(Audiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Littly Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

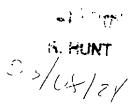
Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: BJM Supplies Corporation (Name of Corporation)	
	
DOCUMENT NUMBER: P23000058626	
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:	
United States Corporation Agents, Inc.	. • • • • • • • • • • • • • • • • • • •
(Name of Person)	:: ::
Legalzoom.com, Inc.	ing the co
(Name of Firm/Company)	
9900 Spectrum Dr.	AH 6: 14 SCEELFL
(Address)	FL :
Austin, TX 78717	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) at (800)773-088 (Area Code & Daytime Telep	8
(Name of Person) (Area Code & Daytime Telep	hone Number)
Fuel and it a short words wought to the Floride Denominant of State for \$9°	7.50 for an active corneration

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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
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 secti	ons 607.0502(2), 617.0502(2), 607.1509, or 617	7.1509,	
Florida Statutes, the undersigned,	United States Corporation Agents, Inc	c.	
	(Name of Registered Agent)		
hereby resions as Registered Ager	BJM Supplies Corporation (Name of Corporation)		
neredy resigns as registered reger	(Name of Corporation)		
P23000058626			
(Document Number, if known)			
A copy of this resignation was ma	iled to the above listed corporation at its last know	own add	ress.
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the date	on whi	ch
	(Signature of Resigning Agent)	. <u>.</u>	1
	(Signiture of Resigning Agent)	- •	, - I .
If signing on behalf of an entity:			; CO
Cheyenne	Moseley	Series	至:
	(Typed or Printed Name)	SSEE, FL	<u></u>
Asst. Secretary	y for United States Corporation Agents, Inc.		
	(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