P93000014594

ī		
(Re	questor's Name)	
(Ad	dress)	
(Address)		
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	•	1

Office Use Only



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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Advanced Building Conscry of Dath Placeda (Name of Corporation)
DOCUMENT NUMBER: P93000H954
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Heather D. H. Davidson (Name of Person)
(Name of Firm/Company)
7601 AIA South (Address)
St. Augustine FL 32080 (City/State and Zip Code)
For further information concerning this matter, please call:
Heather DavidSco at (904) 461-4288 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

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TALLAGIAAN
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, 14coule Daw Michael (Name of Registered Agent)
hereby resigns as Registered Agent for Advanced Building (angular) of Dell'officiale, (Name of Corporation)
PC13cccc 145 94 (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.

Toother Jacon Tooley Cow; olson (Signature of Resigning Agent)

If signing on behalf of an entity:

Heather Dawn Harley-Davidson

Vice President
(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withdrawn corporation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