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COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: DELIVERY SYSTEMS, INC. (Name of Corporation) DOCUMENT NUMBER: P94000024046 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: Karen Loraine (Name of Person) GrayRobinson, P.A. (Name of Firm/Company) 1795 W. Nasa Blvd. (Address) Melbourne, FL 32901 (City/State and Zip Code) For further information concerning this matter, please call: 321 727-8100 (Area Code & Daytime Telephone Number) Michelle Deering (Name of Person) 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 or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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: Mailing Address: Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building Post Office Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

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, Patrick Healy
(Name of Registered Agent)
hereby resigns as Registered Agent for <u>DELIVERY SYSTEMS, INC.</u>
(Name of Corporation)
P94000024046
(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.
J. 1/2
(Signature of Resigning Agent)
If signing on behalf of an entity:
(Typed or Printed Name)
(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withdrawn corporation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