

PA4000087277

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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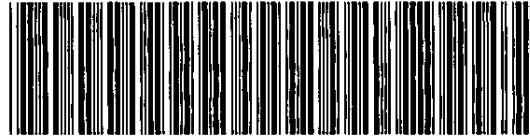
(Business Entity Name)

(Document Number)

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STATE  
CORPORATIONS

AUG 17 2016

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** M. HUNTER CONSTRUCTION, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P94000087277

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:

GARY SIEGEL, ESQUIRE  
(Name of Person)

GARY SIEGEL, ESQUIRE  
(Name of Firm/Company)

520 LAKE MARY BLVD., STE. 103  
(Address)

SANFORD, FLORIDA 32773  
(City/State and Zip Code)

For further information concerning this matter, please call:

GARY SIEGEL at ( 407 ) 878-7860  
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

**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

16 AUG - 8 11:19:12  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

16 AUG - 8  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, GARY SIEGEL

(Name of Registered Agent)

hereby resigns as Registered Agent for M. HUNTER CONSTRUCTION, INC.

(Name of Corporation)

P94000087277

(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.

  
(Signature of Resigning Agent)

If signing on behalf of an entity:

GARY SIEGEL, ESQUIRE

(Typed or Printed Name)

REGISTERED AGENT

(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**