

P95000002479

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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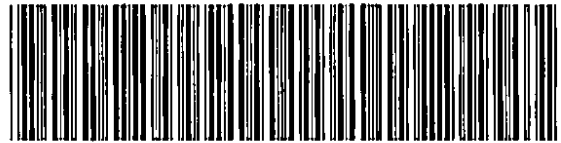
(Business Entity Name)

(Document Number)

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2018 AUG 31 PM 4:49

SEP 06 2018

Clerk

RECEIVED
DIVISION OF CORPORATIONS
2013 AUG 31 PM 4:48

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 2286 Corporation Inc.
(Name of Corporation)

DOCUMENT NUMBER: P95000002479

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:

Steve Vagenas
(Name of Person)

2286 Corporation Inc DBA Key West Bar
(Name of Firm/Company)

2286 Hwy A1A
(Address)

Indian Harbour Bch FL 32937
(City/State and Zip Code)

For further information concerning this matter, please call:

Steve Vagenas at (321) 446-2264
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

CLERK OF
DIVISION OF CORPORATIONS

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

2010 AUG 31 PM 4:58

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

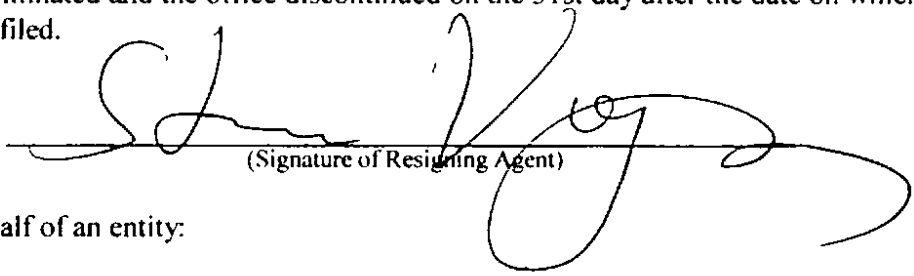
Florida Statutes, the undersigned, Steve Vagenas
(Name of Registered Agent)

hereby resigns as Registered Agent for 2286 Corporation Inc.
(Name of Corporation)

P95000002479
(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:

Steve Vagenas
(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