## Address City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Pick up time Walk in ☐ Will wait Photocopy Certificate of Status Mail out AMENDMENTS NEW FILINGS Profit Amendment Resignation of R.A. .., Officer/Direct NonProfit Change of Registered Agent Limited Liability Domestication Dissolution/Withdrawal Merger Other REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Trademark

Other

Examiner's Initials

## Florida Department of State, Sandra B. Mortham, Secretary of State

## OFFICER / DIRECTOR RESIGNATION

of UNIVERSAL Administration SCAVIC a corporation organized under the laws of the State of Florid F and affirm that the corporation has been notified in writing of the resignation.

## FILING FEE IS \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314