

P95000053495

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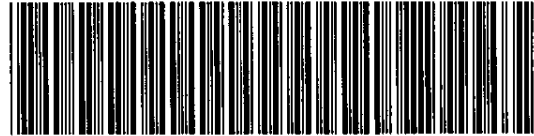
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ra Resignation

LANGFORD & MYERS, P.A.

ATTORNEYS AT LAW

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TAMPA, FLORIDA 33606

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www.langfordmyers.com

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SENDING TO: NAME: Florida Department of State

ATTENTION: Diane

TELECOPIER PHONE NUMBER: (850) 245.6013

CONFIRMATION PHONE NUMBER: (850) 245-6913

NUMBER OF PAGES INCLUDING THIS PAGE: 2

SENDING FROM: NAME: Pam Caskey, Paralegal to Brian E. Langford, Esquire

DATE: November 17, 2014

TELECOPIER NUMBER: (813) 251-1900

ANY PROBLEMS CONTACT: Pam, Paralegal, at (813) 251-5533

CLIENT/MATTER NUMBER: 10039-001

MESSAGE: Per our conversation, attached is a copy of Mr. Langford's Resignation with regard to Lake Kersey Farms, Inc., Document Number P95000053495. Thank you for your assistance on this matter.

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TALLAHASSEE
SECRETARY OF STATE

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS ATTORNEY PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS MESSAGE IN COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

**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, BRIAN E. LANGFORD

(Name of Registered Agent)

hereby resigns as Registered Agent for LAKE KERSEY FARMS, INC.

(Name of Corporation)

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(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:

(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 6317
Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA