

P95000077114

Buchanan Ingersoll & Rooney PC Fowler White Boggs, 8132298313, 2014/08/20 12:24:00 1 /2

Page 1 of 1

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H14000196245 3)))



H140001962453ABC%

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:  
Division of Corporations  
Fax Number : (850) 617-6380

From:  
Account Name : FOWLER, WHITE 2  
Account Number : I19990000148  
Phone : (813) 769-7692  
Fax Number : (813) 228-9401

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**REGISTERED AGENT RESIGNATION  
COACHMAN PLAZA CLEANERS, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

RECEIVED

14 AUG 20 PM 12:24

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

14 AUG 20 AM 11:53

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

AUG 21 2014

T. CARTER

8/20/2014

H14000196245 3

**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,

**FOWLER WHITE BOGGS BANKER, P.A. n/k/a Fowler White Boggs**

hereby resigns as Registered Agent for **COACHMAN PLAZA CLEANERS, INC.**

**P95000077114**

(Document Number)

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:

**FOWLER WHITE BOGGS BANKER, P.A. n/k/a Fowler White Boggs c/o Kendra L. Gaugush**  
(Typed or Printed Name)

\_\_\_\_\_  
Authorized Representative  
(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withdrawn corporation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

H14000196245 3

14 AUG 20 AM 11:53

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA