P96000026489

(F	Requestor's Name)	
(A	ddress)	
——————————————————————————————————————	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(E	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
:		

Office Use Only



500390684525

07/15/11--01027--028 **87.50

2022 JUL 15 AH 10: 03

Ra Risignation

OCT 1 7 2022

D CUSHING

COVER LETTER[®]

Division of Corporations	
AMERICAN ALUMINUM OF WINTER HAVEN, INC	
(Name of Corporation)	
DOCUMENT NUMBER: P96000026489	
The enclosed Resignation of Registered Agent for a Corporation and fee are su	ubmitted for filing.
Please return all correspondence concerning this matter to the following:	
CHRIS BRAUCKMULLER	
(Name of Person)	
BL SMITH GENERAL CONTRACTORS INC	202:
(Name of Firm/Company)	2022 JUIL
3857 W. LAKE HAMILTON DR	.
(Address)	
WINTER HAVEN, FL 33881	<u> </u>
(City/State and Zip Code)	03
For further information concerning this matter, please call:	
CHRIS BRAUCKMULLER 863 294-3949 at (
(Name of Person) (Area Code & Daytime Telepho	one 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

	ns 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	DDIE WAYNE SMITH
	(Name of Registered Agent)
hereby resigns as Registered Agent	for AMERICAN ALUMINUM OF WINTER HAVEN, INC
noteby resigns as respective regene	(Name of Corporation)
P96000026489	
(Document Number, if known)	
A copy of this resignation was maile	ed to the above listed corporation at its last known address.
The agency is terminated and the of this statement is filed.	fice discontinued on the 31st day after the date on which
Eles 1	(Signature of Resigning Agent)
If signing on behalf of an entity:	
EDDIE WAYNE SM	(Typed or Printed Name) (Typed or Printed Name)
TITLE PRESIDENT	03

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withdrawn corporation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
Taliahassee, FL 32314

(Capacity)