

P96000064042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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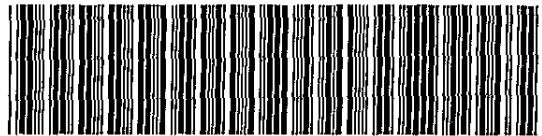
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bounty Marine Services, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P96000064042

The enclosed Resignation of Registered Agent for Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

DJ Kropat (New Registered Agent Brenda Kropat)

(Name of Person)

Bounty Marine Services, Inc.

(Name of Firm/Company)

P.O. Box # 21516

(Address)

Fort Lauderdale, Florida, 33335

(City/State and Zip Code)

For further information concerning this matter, please contact:

DJ Kropat

(Name of Person)

at (A)

524 5446

(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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
409 E. Gaines Street
Tallahassee, FL 32314

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**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(1), 607.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Anne Egar Peace
(Name of Registered Agent)
hereby resigns as Registered Agent for Bounty Services, Inc.
(Name of Corporation)
P96000064042
(Document Number, if known)

A copy of this resignation was mailed to the above 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] [Signature]
(Signature of Registered Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

Fee for filing this document

\$87.50 - Active corporation

\$35.00 - Administrative
withdrawn corporation

dissolved/voluntarily dissolved/
in liquidation

Make checks payable to Florida Department of
Division of Corporations
P.O. Box 1618
Tallahassee, Florida 32301

Secretary of State and mail to:
Tallahassee, Florida 32301
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TALLAHASSEE, FLORIDA