

P96000102095

(Requestor's Name)

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(City/State/Zip/Phone #)

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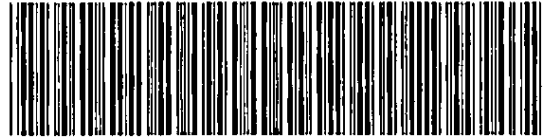
(Business Entity Name)

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S. YOUNG

DEPARTMENT OF STATE  
DIVISION OF CORPORATION  
TALLAHASSEE, FLORIDA

2020 JAN 24 AM 7:12

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LARRY R. HOLLY & ASSOCIATES, INC.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P96000102095  
\_\_\_\_\_

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

JOHN W. WAECHTER  
\_\_\_\_\_

(Name of Person)

ENGLANDER FISCHER  
\_\_\_\_\_

(Name of Firm/Company)

721 1ST AVENUE N  
\_\_\_\_\_

(Address)

ST PETERSBURG, FL 33701  
\_\_\_\_\_

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN W WAECHTER  
\_\_\_\_\_

(Name of Person)

at ( 727 ) 898-7210  
\_\_\_\_\_

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

**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

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, ENGLANDER FISCHER

(Name of Registered Agent)

hereby resigns as Registered Agent for LARRY R. HOLLY & ASSOCIATES, INC.

(Name of Corporation)

P96000102095

(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.

John W. Waechter Partner  
(Signature of Resigning Agent)

If signing on behalf of an entity:

JOHN W. WAECHTER

(Typed or Printed Name)

PARTNER

(Capacity)

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

2020 JAN 24 AM 7:13

FILED

### **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