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.

(((H200001559373)))



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 : BRANT, REITER, MCCORMICK & JOHNSON, P.A.

Account Number : 120040000043

Phone : (904)358-2750 Fax Number : (904)353-1166

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

Email Address: jdmccormick@barmilaw.com

## REGISTERED AGENT RESIGNATION SOUTHEAST DISTRIBUTING, INC.

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

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SOUTHEAST DISTRIBUTING, INC.	
(Name of Corpora	tion)
DOCUMENT NUMBER: P97000039439	· · · · · · · · · · · · · · · · · · ·
The enclosed Resignation of Registered Agent for a Corpo	ration and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
JAN D. MCCORMICK, ESQ.	
(Name of Person)	<del>-</del>
BRANT, REITER, MCCORMICK & JOHNSON, P.A.	
(Name of Firm/Company)	<del>-</del> 
135 WEST BAY STREET, SUITE 400	
(Address)	_
JACKSONVILLE, FL 32202	•
(City/State and Zip Code)	<del>-</del> · · ·
For further information concerning this matter, please call:	
REBECCA CANALES, PARALEGAL 904 at (	366-2384
(Name of Person) (Area Coo	le & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

H200001559373

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60	7.0503(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned,	D. MCCORMICK, ESQ.	
i iorida Omicios, nie anaerosgree,	(Name of Registered Agent)	
hereby resigns as Registered Agent for _	SOUTHEAST DISTRIBUTING, INC. (Name of Corporation)	
tieleby resigns as registered Agent for _		
P97000039439		
(Document Number, if known)	<del>-</del>	
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.	$\cap$	
Qu D	-M. Conne	
If signing on behalf of an entity:	gnature of Resigning Agent)	
	Typed or Printed Name)	
,	Typed or Printed Name)  ALL ARRY  (Capacity)  (Capacity)	
<del></del>	(Capacity)	
	(Capacity)	
	三 章 17	
	\$5 <b>9 0</b>	
	e this document:  ive Corporation	
307.30 - ACI	ive Corporation	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/

Tallahassee, FL 32314

CR2E046 (12/19)