# P98000058723

(Requestor's Name) (Address) (Address)	900409455389
(City/State/Zip/Phone #)	Neve Stateon The FA
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	RECEIVED 2023 JUN - 9 PM 1: 1 FALLAHASSEE, FLOR
Office Use Only	A. RAMSEY JUN 1 22023

### FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 6/9/2023

NAME: ROBINSON NURSERY, INC.

÷

TYPE OF FILING: RESIGNATION OF REGISTERED AGENT

COST: 87.50

**RETURN: PLAIN COPY PLEASE** 

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

RUH

; .

## FILED

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION 2023 JUN -9 AMII: 44

SEPAETARY OF STATE FAUL MHASSEELFLIDRID

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, <u>B&C CORPORATE SERVICES OF CENTRAL FLORIDA</u>

(Name of Registered Agent)

hereby resigns as Registered Agent for \_\_\_\_\_\_

·· .

(Name of Corporation)

P98000058723

(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.

Janice Chasey

(Signature of Resigning Agent)

If signing on behalf of an entity:

Janice Chasey

(Typed or Printed Name)

VP of B&C Corporate Services of Central Florida, Inc.

(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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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 Tailahassee, FL 32314