

P98000064613

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

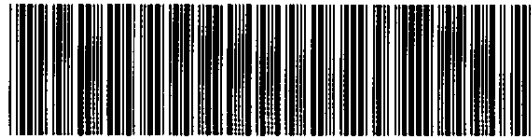
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800181599078

Resignation
DO RA

06/14/10--01040--031 **10.00

06/14/10--01040--032 **25.00

FILED
2010 JUN 14 AM 10:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOE
6/14/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PRUDENTIAL PROPERTIES & REALTY, INC
(Name of Corporation)

DOCUMENT NUMBER: P980000 64 613

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:

DAWN ANGUS
(Name of Person)

PRUDENTIAL PROPERTIES & REALTY, INC
(Name of Firm/Company)

4463 N. STATE RD 7
(Address)

LAUDERDALE LAKES, FL 33319
(City/State and Zip Code)

For further information concerning this matter, please call:

DAWN ANGUS at (407) 863 1168
(Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

FILED

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

2010 JUN 14 AM 10:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned,

DAWN ANGUS

(Name of Registered Agent)

hereby resigns as Registered Agent for

PRUDENTIAL PROPERTIES & REALTY INC.

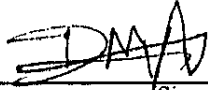
(Name of Corporation)

P-980000-64613

(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.



(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(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
Tallahassee, FL 32314