P99000049841

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COVER LETTER

TO: Amendment Section		
Division of Corporations		
SUBJECT: Alchemy Consultants, Inc		
	(Name of Corpor	ation)
DOCUMENT NUMBER: P990000498-	41	
The enclosed Resignation of Register	ed Agent for a Corpe	pration and fee are submitted for filing.
Please return all correspondence conc	eerning this matter to	the following:
Tae Kelley Bronner		
(Name of Persor	n)	_
(Name of Firm/Com	pany)	_
10006 Cross Creek Blvd., PMB #428		
(Address)		
Tampa, FL 33647		
(City/State and Zip C	Code)	_
For further information concerning th	is matter, please call	:
Tae Kelley Bronner	813 at (907-6643
(Name of Person)	(Area Co	de & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Florida Statutes, the undersigned, _	Tae Kelley Bronner	
	(Name of Registered Agent)	
hereby resigns as Registered Agent	Alchemy Consultants, Inc	
	(Name of Corporation)	
P99000049841		
(Document Number, it known)		
A copy of this resignation was mail	ed to the above listed corporation at its last known ad	dress.
The agency is terminated and the of this statement is filed.	fice discontinued on the 31st day after the date on wh	nich
	Nigrature of Resigning Agent)	*** **
	(Signature of Resigning Agent)	
If signing on behalf of an entity:	(Signature of Resigning Agent)	
If signing on behalf of an entity:	(Signature of Resigning Agent)	
If signing on behalf of an entity:	(Signature of Resigning Agent)	F4
If signing on behalf of an entity:	(Signature of Resigning Agent) (Typed or Printed Name)	• • • • • • • • • • • • • • • • • • •
If signing on behalf of an entity:		
If signing on behalf of an entity:		

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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