

**P99000056953**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : GONZALEZ & ASSOCIATES III PA  
Account Number : I20190000077  
Phone : (954)773-7286  
Fax Number : (954)526-8825

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

Email Address: AGONZALEZ@AMEFINANCIALGROUP.COM

**FILED**

2020 NOV 12 P 2:07

FLORIDA  
DIVISION OF CORPORATIONS

**REGISTERED AGENT RESIGNATION  
MASTER INVESTIGATION & SECURITY, INC.**

Certificate of Status	0
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Page Count	01
Estimated Charge	\$87.50

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MASTER INVESTIGATION & SECURITY INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P99000056953

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:

ANTONIO GONZALEZ

(Name of Person)

GONZALEZ & ASSOCIATES III PA

(Name of Firm/Company)

1820 N CORPORATE LAKES BLVD STE 107

(Address)

WESTON, FL 33326

(City/State and Zip Code)

For further information concerning this matter, please call:

ANTONIO GONZALEZ

(Name of Person)

at ( 954 ) 773-7286

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

H200003926053

**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, GONZALEZ & ASSOCIATES III PA  
(Name of Registered Agent)hereby resigns as Registered Agent for MASTER INVESTIGATION & SECURITY, INC  
(Name of Corporation)P99000056953

(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:

ANTONIO GONZALEZ

(Typed or Printed Name)

OWNER

(Capacity)

CLERK OF STATE  
TALLAHASSEE, FLORIDA

2020 NOV 12 P 2:27

FILED

**Fee for filing this document:**

\$87.50 - Active Corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/  
withdrawn corporationMake checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314