

Q 11811

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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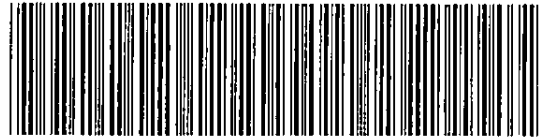
(Business Entity Name)

(Document Number)

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**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: 10/22/2024

NAME: SVENSKA HANDELSBANKEN

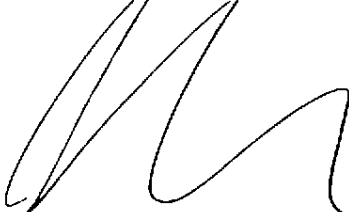
TYPE OF FILING: RESIGNATION OF RA

COST: 87.50

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SVENSKA HANDELSBANKEN

(Name of Alien Business Organization)

DOCUMENT NUMBER: Q11811

The enclosed Resignation of Registered Agent for an Alien Business Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

(Name of Person)

SVENSKA HANDELSBANKEN

(Name of Firm/Company)

599 Lexington Ave, 38th FL

(Address)

New York, NY 10022

(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for:

☐ \$87.50 Filing fee ☐ \$140.00 (\$87.50 Filing Fee and
\$52.50 for Certified Copy)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 21, 2024

FLORIDA FILING & SEARCH SERVICES

SUBJECT: SVENSKA HANDELSBANKEN
Ref. Number: Q11811

We have received your document for SVENSKA HANDELSBANKEN and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a PROFIT CORPORATION, but your entity is a ALIEN BUSINESS ORGANIZATION. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 524A00023141

*Now cover sheet attached. Please keep original
filing date
Thank you!*

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TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
2024 OCT 18 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**RESIGNATION OF REGISTERED AGENT
FOR AN ALIEN BUSINESS ORGANIZATION**

Pursuant to the provisions of section 607.0502(2) Florida Statutes,

the undersigned, B&C CORPORATE SERVICES, INC.

(Name of Registered Agent)

hereby resigns as Registered Agent for SVENSKA HANDELSBANKEN

(Name of Alien Business Organization)

Q11811

(Document Number, if known)

A copy of this resignation was mailed to the above listed alien business organization 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)

Vice President

(Capacity)

Filing Fee: \$87.50

Certified Copy: \$52.50

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314