

Q1200000061

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

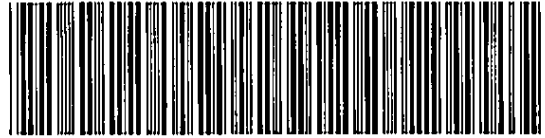
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Segner Brothers Limited
(Name of Alien Business Organization)

DOCUMENT NUMBER: Q12000000061

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:

Jean-Charles Dibbs
(Name of Person)

Corporation Company of Miami
(Name of Firm/Company)

200 South Biscayne Boulevard, Suite 4100
(Address)

Miami, Florida 33131
(City/State and Zip Code)

For further information concerning this matter, please call:

Jean-Charles Dibbs at (305) 379-9192
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

Pursuant to the provisions of section 607.0502(2) Florida Statutes,
the undersigned, Corporation Company of Miami
(Name of Registered Agent)

hereby resigns as Registered Agent for Segner Brothers Limited
(Name of Alien Business Organization)

Q12000000061

(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.


(Signature of Resigning Agent)

If signing on behalf of an entity:

Gary J. Cohen

(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

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