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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 Phone : (702)866-2500

Fax Number : (702)900-2290

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

documents@incorp.com Email Address:

REGISTERED AGENT RESIGNATION J MARK INC. OF CENTRAL FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: J MARK INC. OF CENTRAL FLORIDA (Name of Corporation)	
DOCUMENT NUMBER: V29321	
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:	
Wendy Hefley (Name of Person) Incorp Services, Inc. (Name of Firm/Company)	2022 JUL 5135
3773 Howard Hughes Parkway, Suite 500S (Address)	-6 PH
Las Vegas, NV 89169-6014 (City/State and Zip Code)	F. 35
For further information concerning this matter, please call:	
Wendy Hefley for Incorp Services, Inc. (Name of Person) at (702) 866-2500 ext 6904 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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, Incorp Services, Inc. (Name of Registered Agent)
hereby resigns as Registered Agent for <u>J.MARK INC. OF CENTRAL FLORIDA</u> (Name of Corporation)
V29321 (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. InCorp Services, Inc. (Signature of Resigning (gent))
If signing on behalf of an entity:
Wendy Hefley (Typed or Printed Name)
Authorized Representative on behalf of Incorp Services, Inc. (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