157149

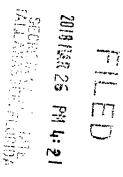
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
. (Bu	ısiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
!		

Office Use Only



800310875988

03/26/18--01031--008 **522.50



RARCS

MAR 2 8 2018 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations	
All Air Conditioned Self Storage, Inc. SUBJECT:	
(Name of Corpor	ation)
DOCUMENT NUMBER: V57149	
The enclosed Resignation of Registered Agent for a Corpo	oration and fee are submitted for filing
Please return all correspondence concerning this matter to	the following:
Reginald G. Stambaugh	
(Name of Person)	
Stambaugh Law Firm	
(Name of Firm/Company)	_
224 Datura Street, Suite 1001	
(Address)	_
West Palm Beach, Florida 33401	
(City/State and Zip Code)	_
For further information concerning this matter, please call	:
Reginald G. Stambaugh 561	832-0272
(Name of Person) at (Area Coo	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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the pr	rovisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes,	Reginald G. Stambaugh, P.A.
	(Name of Registered Agent) All Air Conditioned Self Storage, Inc.
nereby resigns as	Registered Agent for(Name of Corporation)
V57149	(····································
(Document	Number, if known)
A copy of this res	signation was mailed to the above listed corporation at its last known address.
The agency is terminated this statement is f	minated and the office discontinued on the 31st day after the date on which filed. (Signature of Resigning Agent)
If signing on beha	alf of an entity:
	Reginald G. Stambaugh
	(Typed or Printed Name) President
	President
	(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