(R	equestor's Name)	
(A	ddress)	
(Ad	ddress)	
(Ci	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	e)
(Oc	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	F63.1	
		

Office Use Only



300423177813

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: YRON INC.	
(Name of Corporation (Name of Corporation) DOCUMENT NUMBER: P18000063305	on)
The enclosed Resignation of Registered Agent for a Corpora	ation and fee are submitted for filing.
Please return all correspondence concerning this matter to the	ne following:
Westley Look	
(Name of Person)	
Incorporating Services, Ltd.	
(Name of Firm/Company)	
3500 S DuPont Hughway	
(Address)	
Dover, DE 19901	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
	531-0703 & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 provisions of secti	ons 607.0502(2), 617.0502(2), 607.1509, or	r 617.1509,
Florida Statutes, the undersigned.	Incorporating Services, Ltd.	
•	(Name of Registered Agent)	
hereby resigns as Registered Ager	or for YRON INC.	
noredy resigns as registered rigor	(Name of Corporation)	
P18000063305		
(Document Number, if known)		
A copy of this resignation was ma	iled to the above listed corporation at its las	st known address.
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the	date on which
_ AA	(Signature of Resigning Agent)	
If signing on behalf of an entity:		• .
А	manda Archambault	•
 -	(Typed or Printed Name)	
,	Assistant Secretary	
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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