

P00000091059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

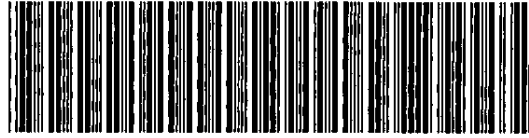
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 NOV 26 PM 1:26

C. Lewis
12-3-14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AKRO ADVISORS INC

(Name of Corporation)

DOCUMENT NUMBER: P00000091059

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:

Fernando Alvarez

(Name of Person)

Akro Advisors Inc

(Name of Firm/Company)

185 SW 7th Street Apt 4001

(Address)

Miami-FL 33130

(City/State and Zip Code)

For further information concerning this matter, please call:

Fernando Alvarez

(Name of Person)

at (**305**) **9629287**

(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

14 NOV 24 PM 1:26

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Camilo Nino

(Name of Registered Agent)

hereby resigns as Registered Agent for AKRO ADVISORS INC

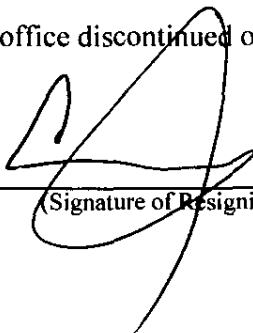
(Name of Corporation)

P00000091059

(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.



(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(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