P03000061598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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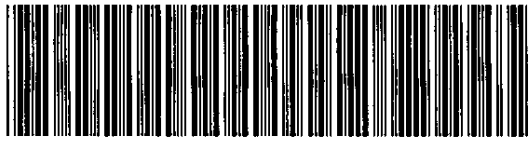
(Business Entity Name)

(Document Number)

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RA/RES
@ 9.15.14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Nirvana Inverrary Lofts Inc.
(Name of Corporation)

DOCUMENT NUMBER: P03000061598

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:

Alegria, Alejandro
(Name of Person)

Nirvana Inverrary Lofts Inc.
(Name of Firm/Company)

3366 SPANISH MOSS TERRACE
(Address)

LAUDERHILL, FL 33319
(City/State and Zip Code)

For further information concerning this matter, please call:

Alegria, Alejandro at (954) 4850500
(Name of Person) (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of State for $87.50 for an active corporation or $35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 16, 2014

ALEJANDRO ALEGRIA
3366 SPANISH MOSS TERRACE
LAUDERHILL, FL 33319 US

SUBJECT: NIRVANA INVERRARY LOFTS, INC.
Ref. Number: P03000061598

You can not resign as an officer and the registered agent on the same form. Please see the enclosed forms to resign or change the registered agent information.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 914A00015328

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, Arvind Yadav
(Name of Registered Agent)

hereby resigns as Registered Agent for Nirvana Inverrary Lofts Inc.
(Name of Corporation)

P03000061598
(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

14 SEP 15 PM 8:03