

LS6650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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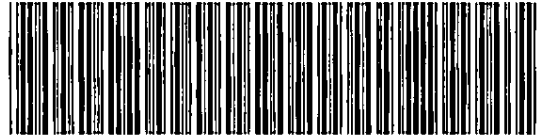
(Business Entity Name)

(Document Number)

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2022 APR -4 AM 10:52

SECTION 1  
TALLAHASSEE, FL

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CUATES HOLDINGS INC.

\_\_\_\_\_  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L86650

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alvaro Castillo, Esq.

\_\_\_\_\_  
Name of Person

Alvaro Castillo B., P.A.

\_\_\_\_\_  
Name of Firm/Company

1390 Brickell Ave. Suite 200

\_\_\_\_\_  
Address

Miami, FL 33131

\_\_\_\_\_  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alvaro Castillo

305

371-5540

at (

\_\_\_\_\_  
Name of Person

\_\_\_\_\_)   
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration 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, MARTIN URRUELA

(Name of Registered Agent)

hereby resigns as Registered Agent for CUATES HOLDINGS INC.

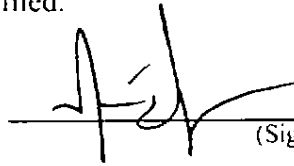
(Name of Corporation)

L86650

(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:

Martin Urruela

(Typed or Printed Name)

(Capacity)

SECRET  
TALLHASSEE, FL

2022 APR -4 AM 10:52

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### 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