

408626

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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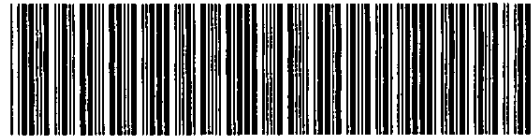
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RA Resign

6/8/12

DC

ARNALDO VÉLEZ, P.A.

ARNALDO VÉLEZ
ATTORNEY AT LAW

35 ALMERIA AVENUE
CORAL GABLES, FL 33134

TELEPHONE: (305) 461-9499
TELECOPIER: (305) 461-9498
E-MAIL: AVELEZ@VELEZLAWOFFICES.COM

May 30, 2012

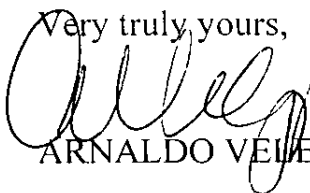
Amendment Section
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

RE: Okeechobee Discount, Corporation

Gentlemen:

Enclosed is original and one copy of Resignation of Registered Agent for Corporation along with our firm's check for the applicable fee.

Very truly yours,



ARNALDO VÉLEZ

AV/gv
Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Okeechobee Discount, Corporation

(Name of Corporation)

DOCUMENT NUMBER: 408626

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:

(Name of Person)

Arnaldo Velez, P.A.

(Name of Firm/Company)

35 Almeria Avenue

(Address)

Coral Gables, FL 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

Arnaldo Velez

(Name of Person)

at (**305**) **461-9499**

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

**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, Arnaldo Velez, P.A.

(Name of Registered Agent)

hereby resigns as Registered Agent for Okeechobee Discount, Corporation

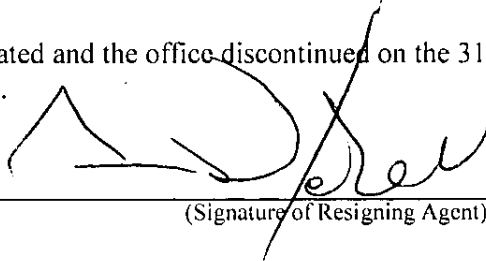
(Name of Corporation)

408626

(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:

Arnaldo Velez

(Typed or Printed Name)

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

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