

489844

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6380

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Account Name : LAZARUS CORPORATE FILING SERVICE, INC
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Phone : (305)552-5973
Fax Number : (305)675-5944

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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REGISTERED AGENT RESIGNATION LA REINA PHARMACY, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$87.50

RA Resign.

JAN 12 2016

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Corporate Filing Menu

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**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,

Nathalee Veigas
(Name of Registered Agent)

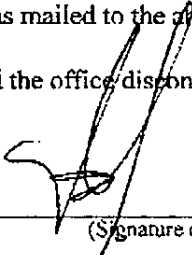
hereby resigns as Registered Agent for

La Reina Pharmacy, Inc.
(Name of Corporation)489844

(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/
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Division of Corporations
P.O. Box 6327
Tallahassee, FL 3231416 JAN 11 AM 9:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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