540086

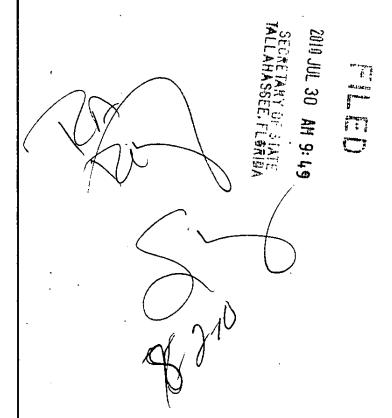
	(Requestor's Name)
	(Address)
.:	(Address)
	(City/State/Zip/Phone #)
	- -
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:
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07/30/10--01039--010 **87.50



COVER LETTER

SUBJECT: Aurora Plumbing, Corporat	
(Name of Corp	oration)
DOCUMENT NUMBER: 540086	
The enclosed Resignation of Registered Agent for a Cor	poration and fee are submitted for filing.
Please return all correspondence concerning this matter	to the following:
· :	•
G. Frank Quesada, Esquire	
(Name of Person)	
Law Offices of G. Frank Quesada	
(Name of Firm/Company)	
1313 Ponce de Leon Boulevard, Suite 200 (Address)	<u> </u>
Coral Gables, Florida 33134	
(City/State and Zip Code)	
For further information concerning this matter, please ca	all:
G. Frank Quesda, Esquire at (305	446-2517 Code & Daytime Telephone Number)
(Name of Person) (Area C	Code & Daytime Telephone Number)

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Florida Statutes, the undersigned,	,Ovidio J. Viera
	(Name of Registered Agent)
nereby resigns as Registered Age	ent for Aurora Plumbing, Corporation (Name of Corporation)
540086 (Document Number, if known)	<u> </u>
A copy of this resignation was ma	ailed to the above listed corporation at its last known add
this statement is filed.	4/1
this statement is filed.	
this statement is filed.	(Signature of Resigning Agent)
* Al	(Signature of Resigning Agent)
If signing on behalf of an entity:	(Signature of Resigning Agent)
If signing on behalf of an entity:	(Signature of Resigning Agent) O J. Viera (Typed or Printed Name)

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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)