611710

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(Address)				
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OF AUG 23 PH 1: 10
SEURGLANY OF STATE

Z/A Resgn.

COVER LETTER

SUBJECT: MANGOWOOD DEV	(Name of Corpora	ation)	
DOCUMENT NUMBER: 61171	0 ′		
The enclosed Resignation of Registe	ered Agent for a Corpo	oration and fee are submitt	ted for filing.
Please return all correspondence con	cerning this matter to	the following:	
Pedro A. Martin			
(Name of Perso	on)	<u> </u>	
Greenberg Traurig, P.A.			
(Name of Firm/Cor	npany)		
1221 Brickell Avenue			•
(Address)			
Miami, FL 33131			
(City/State and Zip	Code)		
For further information concerning t	his matter, please call	:	
Pedro A. Martin	at (305	579-0545	
(Name of Person)	(Area Co	de & Daytime Telephone Ni	ımber)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

TO:

Amendment Section

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617	7.1509,		
Florida Statutes, the undersigned, Pe	edro A. Martin			
-	(Name of Registered Agent)			
hereby resigns as Registered Agent for	MANGOWOOD DEVELOPMENT CORPORATIC			
	(Name of Corporation)			
611710				
(Document Number, if known)				
A copy of this resignation was mailed to	o the above listed corporation at its last kno	own address.		
this statement is filed.	discontinued on the 3.1 st day after the date	on which		
, (Si	ghature of Resigning Agent)	•		
If signing on behalf of an entity:				
Pedro A. Martin	•			
	Typed or Printed Name)	OG AUG 23		
Registered Agent		TOTAL DE PONICAME		
	(Capacity)	PH 1: 10 SEE, FLORIDA		
	g this document: ive corporation	D		
¥2.102 1.00	- · · · · · · · · · · · · · · · · · · ·			

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/