## 853411

•
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Plainview Corporation N.V.
(Name of Corporation)
DOCUMENT NUMBER: 853411
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:
Pedro A. Martin
(Name of Person)
Greenberg Traurig, P.A.
(Name of Firm/Company)
1221 Brickell Avenue
(Address)
Miami, FL 33131
(City/State and Zip Code)
For further information concerning this matter, please call:
Pedro A. Martin  at (305) 579-0545  (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corpor or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 provisio	ns of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the unc	lersigned, Pedro A. Martin
,	(Name of Registered Agent)
hereby resigns as Regist	ered Agent for Plainview Corporation N.V.
, ,	(Name of Corporation)
853411	
(Document Number	, if known)
A copy of this resignation	on was mailed to the above listed corporation at its last known address.
The agency is terminate this statement is filed.	d and the office discontinued on the 31st day after the date on which  (Signature of Resigning Agent)
If signing on behalf of a	n entity:
Ped	lro A. Martin
	(Typed or Printed Name)
Reg	istered Agent
	(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withdrawn corporation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