## K32152

(Requestor's Name)				
(Address)				
(188,000)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
,				
Certified Copies Certificates of Status				
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SECRETARY OF STALE ALLAHASSEE, FLORID;

FILED
2013 MAR 12 AM 8: 33

MAR 14 2013
T. LEWIEUX

## **COVER LETTER**

TO: Amendment Section Division of Corporation	
SUBJECT:	SAVA MANAGEMENT, INC.
	(Name of Corporation)
DOCUMENT NUMBER:	К 32152
The enclosed Resignation of Re	gistered Agent for a Corporation and fee are submitted for fill
Please return all correspondence	concerning this matter to the following:
C.W.PRICE	
(Name of	Person)
TAHITIAN GROVES, INC	,
TAILLIAN GROVES, INC	,
(Name of Fire	/Company)
P.O.BOX 924282	
(Addr	ess)
HOMESTEAD, FL. 33092	-4282
(City/State an	Zip Code)
For further information concern	ng this matter, please call:
C. W.PRICE	at ()
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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,	JOHN	A. JABRO			
		(Name of Registered Agent)			
hereby resigns as Registered Agent for	SAVA	MANAGEMENT, INC.		_	
		(Name of Corporation)			
К 32152					
(Document Number, if known)					
A copy of this resignation was mailed to the	he above	listed corporation at its last know	wn address.		
an					
The agency is terminated and the office of	scontinue	ld on the 31st day after the date	on which		
this statement is filed.		Win			
(S/gna	ature of Res	gning Agent)			
If signing on behalf of an entity:		,			
in ingg cir action of yearing.					
(Ту	ped or Prin	ited Name)			
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	(Capac	ity)	VLL SEC	2013 MAR 12	
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Fee for filing			mg :		η
\$87.50 - Activ \$35.00 - Admi	e Corpora nistrative	ation ly dissolved/voluntarily dissolve poration			フ
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Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314