L76831



Ms. M. Miron 333 Sunset Dr Apt 207 Fort Lauderdale, FL 33301

City/State/Zip

CR2E031(7/97)

Phone #

600004732726---12/19/01--01043--017 *****87.50 *****87.5

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

(Corporation Name)	(Document #)	in the second se
(Corporation Name)	(Document #)	
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(Corporation Name)	(Document #)	EFFLORIDE TO
(Corporation Name)	(Document #)	See
Walk in Pick up time _		ertified Copy
Mail out Will wait	Photocopy C	Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	na aasaan oo ah
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Offi Change of Registered Ag Dissolution/Withdrawal Merger	
OTHER FILINGS	REGISTRATION/QUALIF	ICATION 3
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other	FICATION VIOLOTO VI
	Ex	aminer's Initials

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, SEL Miron (Name of registered agent)	
hereby resigns as Registered Agent for AFFORDABLE Guestroom Designs, Inc. (Name of corporation)	-
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)	The state of the s
(Capacity)	

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation

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