

L95622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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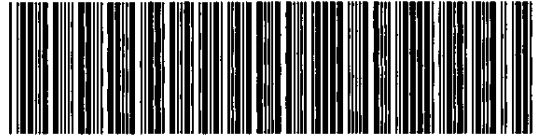
(Business Entity Name)

(Document Number)

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*Resignation  
to RA*

03/27/14--01017--005 \*\*87.50

FILED

2014 MAR 27 PM 12:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*DR  
3/28/14*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** THE TORCH ENTERPRISES, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** L95622

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:

**JORGE SALCEDO H., ESQ.**

(Name of Person)

**SALCEDO ATTORNEYS AT LAW, P.A.**

(Name of Firm/Company)

**200 S. BISCAYNE BLVD. SUITE 2700**

(Address)

**MIAMI 3313**

(City/State and Zip Code)

For further information concerning this matter, please call:

**JORGE SALCEDO** at **(305) 375-0640**

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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2014 MAR 27 PM 12:39

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, OCIEL CORADO

(Name of Registered Agent)

hereby resigns as Registered Agent for THE TORCH ENTERPRISES, INC.

(Name of Corporation)

L95622

(Document Number, if known)

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:

OCIEL CORADO

(Typed or Printed Name)

PRESIDENT / DIRECTOR

(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