M49331

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| (Re | equestor's Name) | |
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| (Ac | idress) | |
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| (Ac | ldress) | |
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| Certified Copies | _ Certificates | of Status |
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| Special Instructions to | Filing Officer | |
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COVER LETTER

| TO: | Amendment Section Division of Corporations |
|--------|---|
| SUBJ | DECT: FIGGY FRITAS, INC. (Name of Corporation) |
| DOC | UMENT NUMBER: M49331 |
| The e | nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing. |
| Please | e return all correspondence concerning this matter to the following: |
| Ped | ro A. Martin |
| | (Name of Person) |
| Gree | enberg Traurig, P.A. |
| | (Name of Firm/Company) |
| 122 | 1 Brickell Avenue |
| | (Address) |
| Miai | mi, FL 33131 |
| | (City/State and Zip Code) |
| For fi | orther information concerning this matter, please call: |
| Pedr | ro 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

| Pursuant to the pr | ovisions of sections of | 07.0502(2), 617.0502(2), 607.1509, or 617.13 | 509, | |
|--|-------------------------|--|---------------------------------------|---------|
| Florida Statutes, t | he undersigned, Pe | dro A. Martin (Name of Registered Agent) | | |
| hereby resigns as | Registered Agent for | FIGGY FRITAS, INC. (Name of Corporation) | <u> </u> | |
| M49331 | | | | |
| (Document | Number, if known) | _ | | |
| A copy of this res | ignation was mailed to | the above listed corporation at its last know | n address. | |
| The agency is terminated this statement is f | īled. | discontinued on the 31st day after the date of gnature of Resigning Agent) | n which | |
| If signing on beha | alf of an entity: | · | | |
| , | Pedro A. Martin | | 2006 AUG 24 SEURETARY ALLAHASSE | |
| | (| Typed or Printed Name) | IG 21 TAR ASS | <u></u> |
| | Registered Agent | | Y OF | ILEO |
| • | | (Capacity) | 9: L | |

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