N 1500000 5604

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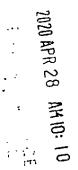


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COVER LETTER

Name of Corporation)
Name of Corporation)
gent for a Corporation and fee are submitted for filin
g this matter to the following:
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tter, please call:

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned,	Raquel Rodriguez	
The distribution of the content of t	(Name of Registered Agent)	
hereby resigns as Registered Agen	t fort for	
	(Name of Corporation)	
N15000005604		
(Document Number, if known)		
A copy of this resignation was ma	iled to the above listed corporation at its last known address.	
The agency is terminated and the of this statement is filed.	(Signature of Resigning Agent)	
If signing on behalf of an entity:		
	(Typed or Printed Name) (Capacity)	
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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