

P00000018724

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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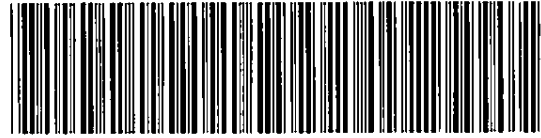
(Business Entity Name)

(Document Number)

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

TCHENNA GROUP INC

Please Debit FCA000000003 For: 87.50

Thank you Seth Neeley



☐ Art of Inc. File _____
☐ LTD Partnership File _____
☐ Foreign Corp. File _____
☐ L.C. File _____
☐ Fictitious Name File _____
☐ Trade/Service Mark _____
☐ Merger File _____
☐ Art. of Amend. File _____
☒ RA Resignation _____
☐ Dissolution / Withdrawal _____
☐ Annual Report / Reinstatement _____
☐ Cert. Copy _____
☐ Photo Copy _____
☐ Certificate of Good Standing _____
☐ Certificate of Status _____
☐ Certificate of Fictitious Name _____
☐ Corp Record Search _____
☐ Officer Search _____
☐ Fictitious Search _____
☐ Fictitious Owner Search _____
☐ Vehicle Search _____
☐ Driving Record _____
☐ UCC 1 or 3 File _____
☐ UCC 11 Search _____
☐ UCC 11 Retrieval _____
☐ Courier _____

Signature

Requested by:

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TCHENNA GROUP INC.

(Name of Corporation)

DOCUMENT NUMBER: P00000018724

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:

SUSANA SALDARRIAGA

(Name of Person)

DIEGO L RESTREPO P.A.

(Name of Firm/Company)

2600 SOUTH DOUGLAS ROAD SUITE 913

(Address)

CORAL GABLES, FL. 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

SUSANA SALDARRIAGA at (305) 447-9430

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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 sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, INTERNATIONAL CORPORATE SERVICE, INC
(Name of Registered Agent)

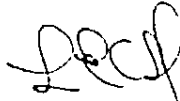
hereby resigns as Registered Agent for TCHENNA GROUP INC.
(Name of Corporation)

P00000018724

(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:

LUISA ELENA CUADRADO

(Typed or Printed Name)

DIRECTOR, SECRETARY

(Capacity)

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TALLAHASSEE, FLORIDA

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