P01000101669 Address City/State/Zip Phone # Office Use Only

CORPORATION_NAME(S)	& DOCUMENT NUMBER(S),	(if known):
---------------------	-----------------------	-------------

CR2E031(7/97)

1((Corporation Name)	(Document #)	400 <u>0</u> 05328004	سر -
2	Corporation Name)	(Document #)	-04/23/0201084002 ******87.50 *****87.	; 50
3.				
((Corporation Name)	(Document #)		
4	Corporation Name)	(Document #)	 	e.
☐ Walk in ☐ Mail out	☐ Pick up time _	Photocopy	☐ Certified Copy ☐ Certificate of Status	
NEW FILINGS Profit Not for Proficion Limited Lia Domestication Other OTHER FILIN	fit_ bility ion	AMENDMENTS Amendment Resignation of R Change of Regis Dissolution/With Merger REGISTRATION/C	ndrawal RPOF STATE	-
Annual Rep Fictitious N		Foreign Limited Partners Reinstatement Trademark Other	R. A. Resignation Examiner's Initials AFT	-

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

2002 MAY -3 AM 11: 05

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, _ Ava B. Gome-Z
hereby resigns as Registered Agent for San Babriel Craar Corporation (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.
and the second s
(Signature of resigning agent)
If signing on behalf of an entity:
(Typed or Printed Name)
(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