

P03000107450

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

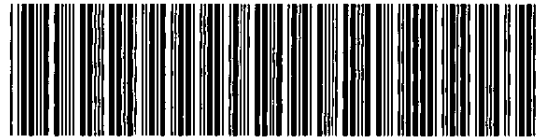
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600121809506

04/04/08--01038--015 **525.00

FILED

08 APR -4 PM 1:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA-RS 4/8/08

March 26, 2008

Amendment Section
Division of Corporations

Subject: Hacienda Puertas del Paraiso Corp.

Document Number: P03000107450

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:

Sylvia Goyez
Hacienda Puertas del Paraiso Corp.
2601 N.W. 105th Avenue
Miami, FL 33172

For further information concerning this matter, please call:

Sylvia Goyez at (305) 371-6717

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, RICARDO PINES, hereby resigns as Registered Agent for HACIENDA PUERTAS DEL PARAISO CORP. Document Number: P03000107450.

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 was filed.



(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/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Withdrawn corporation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**

FILED
08 APR -4 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA