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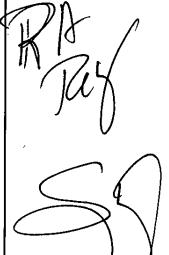
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
TALLAHASSEF FIRES

COVER LETTER

Division of Corporations
SUBJECT: Summers Travel Inc.
(Name of Corporation)
DOCUMENT NUMBER: <u>P0400085259</u>
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:
Juan D. Berrio, Esq.
(Name of Person)
Berrio & Berrio, P.A.
(Name of Firm/Company)
2828 Coral Way, Suite 304
(Address)
Miami, Florida 33145
(City/State and Zip Code)
For further information concerning this matter, please call:
Juan D. Berrio, Esq. at (305) 444-1533 (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 corn

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Fursuant to the provisions of sections $607.0502(2)$, $617.0502(2)$, 607.1509 , or 617.1509 ,
Florida Statutes, the undersigned, Ernesto Millian
(Name of Registered Agent)
hereby resigns as Registered Agent for Summers Travel Inc.
(Name of Corporation)
P0400085259
(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.
- Continu
(Signature of Resigning Agent)
If signing on behalf of an entity:
ENESTO MILLAN (Typed or Printed Name)
TASE 9
(Capacity) (Capacity) (Capacity)
Fee for filing this document: \$87.50 - Active corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/
φοσίου παιτιπτιστιατίνου αισσοίνου τοιατιατίτη αισσοίνου

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation