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## **COVER LETTER**

SUBJECT: IDS INC.	
(Name of Cor	poration)
DOCUMENT NUMBER: P040000132848	
The enclosed Resignation of Registered Agent for a Co	orporation and fee are submitted for filing
Please return all correspondence concerning this matter	r to the following:
RAUL R. LOPEZ	
(Name of Person)	<del></del>
RAUL R. LOPEZ, P.A.	
(Name of Firm/Company)	<del></del>
7950 NW 155TH STREET, SUITE 206	
(Address)	<del></del>
MIAMI LAKES, FL 33016	
(City/State and Zip Code)	<del></del>
For further information concerning this matter, please of	call:
RAUL R. LOPEZ at ( 30	5 <sub>)</sub> 818-0117
(Name of Person) (Area	Code & Daytime Telephone Number)

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,E	DUARDO RAMIREZ	
1 Torida Statutes, the andersigned,	(Name of Registered Agent)	
hereby resigns as Registered Agent fo	IDS INC. (Name of Corporation)	
P040000132848		
(Document Number, if known)	<del></del>	
A copy of this resignation was mailed	to the above listed corporation at its last known address.	
this statement is filed.	ce discontinued on the 31st day after the date on which	
If signing on behalf of an entity:	Signature of Resigning Agent)	
<del>- 14 (2011)                                   </del>	(Typed or Printed Name)	
	O7 AUG SECRETAR TALLAHASS (Capacity)	
\$87.50 - A	ing this document: active corporation administratively dissolved/voluntarily dissolved/	

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

withdrawn corporation