P05000069300

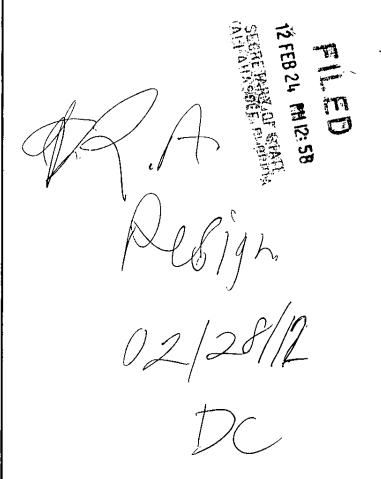
(Re	questor's Name)		
——————————————————————————————————————	dress)		
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PICK-UP	☐ WAIT	MAIL	
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: The Mahogany G	rille, Inc.
	(Name of Corporation)
DOCUMENT NUMBER: PO!	5000069300
The enclosed Resignation of Reg	gistered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence	concerning this matter to the following:
(Name of P	'erson)
The Mahogany Grille, Inc.	
(Name of Firm/	(Company)
2190 NW 183rd Street	
(Addres	SS)
Miami Gardens, Florida 3305	55
(City/State and	Zip Code)
For further information concerni	ng this matter, please call:
Andre Dawson (Name of Person)	at (305) 773-2863 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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	607.0302(2), 617.0302(2), 607.1309, or 617.13	509,
Florida Statutes, the undersigned,V	/incent T. Brown	
, ,	(Name of Registered Agent)	
hereby resigns as Registered Agent fo	r The Mahogany Grille, Inc e rpγ∧†e∂	ı
mercey resigns as registered regent to	(Name of Corporation)	,
P05000069300		
(Document Number, if known)		
A copy of this resignation was mailed	to the above listed corporation at its last know	n address.
The agency is terminated and the office this statement is filed.	ce discontinued on the 31st day after the date or	n which
	Signature of Resigning Agent)	
If signing on behalf of an entity:		
	7	் இதன்
		T (
	(Typed or Printed Name)	
	;	F 24
	*	et e
	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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