# P050000 90833

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(710	u.c,	
(Cit	y/State/Zip/Phone	e #)
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### **COVER LETTER**

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

### **Mailing Address:**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509	9,
Florida Statutes, the undersigned,	IDALBERTO CABELLO	
remand statement, and amandament,	(Name of Registered Agent)	
nereby resigns as Registered Agen	f. for G.M. KIDS CORP.	
refer y resigns as registered regen	(Name of Corporation)	· · ·
P05000090833		
(Document Number, if known)		
A copy of this resignation was mai	iled to the above listed corporation at its last known a	address.
The agency is terminated and the chis statement is filed.	office discontinued on the 31st day after the date on v	
	(Signature of Resigning Agent)	2020 ::
f signing on behalf of an entity:		11.
IDALBERTO CAB	ELLO	
	(Typed or Printed Name)	[311:10
DIRECTOR PRESI	DENT	10

Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)