P06000143525

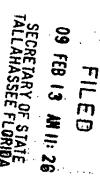
(Re	questor's Name)
(Ad	dress)
(Ad	dress)
(Cit	y/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Bu	siness Entity Name)
(Do	cument Number)
Certified Copies	Certificates of Status
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COVER LETTER

10:	Amendment Section Division of Corporations
SUBJ	ECT: MATTHEW HANNAH INC.
	(Name of Corporation)
DOCU	JMENT NUMBER: P06000143525
The en	closed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
Andr	es Barreto
*****	(Name of Person)
	(Name of Firm/Company)
1041	6 Maronda Drive
	(Address)
Rive	rview, Fl. 33578-8391
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Andre	es Barreto at (813) 597-9595 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclos or \$35	sed is a check made payable to the Florida Department of State for \$87.50 for an active corporation .00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
_	
Amend Division Clifton 2661 E	Address: Idment Section On of Corporations On Building Executive Center Circle assee, 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	f sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersi	gned, Manuel J. Herrera
	(Name of Registered Agent)
herehy resigns as Registered	Agent for MATTHEW HANNAH INC.
neroby redigits as registered	(Name of Corporation)
P06000143525	
(Document Number, if k	nown)
A copy of this resignation w	as mailed to the above listed corporation at its last known address.
The agency is terminated an this statement is filed.	d the office discontinued on the 31st day after the date on which
If signing on behalf of an en	Manual (Signature of Resigning Agent) tity:
	·
·	(Typed or Printed Name)
	(Capacity) ASSET OF SET OF SE
\sqrt{s}	Fee for filing this document: 87.50 - Active corporation
\$	35.00 - 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