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SECRETARY OF STATE BIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section
Division of Corporations
SUBJECT: Mi Abitare Corp.
(Name of Corporation)
DOCUMENT NUMBER: P08000038465
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:
Maria C. Arriola Velez
(Name of Person)
Maria C. Arriola Velez, PA
(Name of Firm/Company)
35 Almeria Avenue
(Address)
Coral Gables, FL 33134
(City/State and Zip Code)
For further information concerning this matter, please call:
Maria C. Arriola Velez at (305) 461-9223 (Name of Person) (Area Code & Daytime Telephone Number)
(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 corporation

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 6	07.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Ma	aria C. Arriola Velez PA.
	(Name of Registered Agent)
hereby resigns as Registered Agent for	Mi Abitare Corp.
, , , , , , , , , , , , , , , , , , , ,	(Name of Corporation)
P08000038465	
(Document Number, if known)	_
A copy of this resignation was mailed to	o the above listed corporation at its last known address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which
Mus	Education of Resigning Agent)
If signing on behalf of an entity:	THE SECTION OF THE SE
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	Typed or Printed Name) 2 7777
	APORTO
	(Canacity) ω

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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