P09000066110

(Re	equestor's Name)	
(Ac	ldress)	
V	,	
(Address)		
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

Division of Corporations	
SUBJECT: Sports4Life Corp.	
(Name of Corporation)	
DOCUMENT NUMBER: P09000066110	
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for f	filing.
Please return all correspondence concerning this matter to the following:	
Carlos Eduardo Mariaca	
(Name of Person)	
Center Group Corp.	
(Name of Firm/Company)	
8405 NW 53rd Street, Suite A100	
(Address)	
Doral, FL 33166	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Carlos Eduardo Mariaca at (305) 471-4870 ext. 203	
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 607.0502(2), 617.0502(2), 607:1509, or 617.1509,		
Florida Statutes, the undersigned,Carlos E Mariaca		
(Name of Registered Agent)		
hereby resigns as Registered Agent for Sports4Life Corp.		
(Name of Corporation)		
P0900066110		
(Document Number, if known)		
A copy of this resignation was mailed to the above listed corporation at its last known addr	ess.	
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. (Signature of Resigning Agent)	h	
If signing on behalf of an entity:		
(Typed or Printed Name)		
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(Capacity)	ည်	
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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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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