P10000037783

(Re	questor's Name)	
(Add	dress)	
(Ade	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	пе)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Eiling Officer	
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SLORE DARY OF STATE OF CORPORATION

C.COULLIETTE

JUN 0 2 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Grab & Go Corp. (Name of Corporation)
DOCUMENT NUMBER: p10000037783
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:
Lisette Salazar, Esq.
(Name of Person)
(Name of Firm/Company)
200 Crandon Blvd. #311
(Address)
Key Biscayne, FI . 33149
(City/State and Zip Code)
For further information concerning this matter, please call:
Lisette Salazar at (305) 3616161
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

CR2E046(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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, Sergio Vuguin (Name of Registered Agent)
hereby resigns as Registered Agent for Grab & Go Corp. (Name of Corporation)
P10 0000 37783
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.
\times $/m$
(Signature of Resigning Agent)
If signing on behalf of an entity:
(Typed or Printed Name)
(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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