P10000040847

(Requestor's Name)	
(Address)	
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(City/State	/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Document Number)	
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BIVISION OF CORPORATIONS
11 MAR 28 AM 9: 36

RARES 03/30/11

COVER LETTER

Division of Corporations	
SUBJECT: PAMPA BRAVA COR	Ρ
	(Name of Corporation)
DOCUMENT NUMBER: P1000	0040847
	red Agent for a Corporation and fee are submitted for filing.
Please return all correspondence con-	cerning this matter to the following:
MYRIAM FRIDMAN	
(Name of Perso	n)
PAMPA BRAVA CORP	
(Name of Firm/Con	npany)
5750 COLLINS AVE # 6E	
(Address)	
MIAMI BEACH FL 33140	
(City/State and Zip	Code)
For further information concerning the	his matter, please call:
MYRIAM FRIDMAN	at (344-3152
(Name of Person)	(Area Code & Daytime Telephone Number)

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

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.



March 14, 2011

MYRIAM FRIDMAN PAMPA BRAVA CORP 5750 COLLINS AVE #6E MIAMI BEACH, FL 33140

SUBJECT: PAMPA BRAVA CORP Ref. Number: P10000040847

We have received your document for PAMPA BRAVA CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to resign as registered agent of an active corporation is \$87.50.

There is a balance due of \$52.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Letter Number: 211A00006168

Irene Albritton Regulatory Specialist II

www.sunbiz.org

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ns 607.0502(2), 617.0502(2), 607.1509, or 617.1509.	
Florida Statutes, the undersigned,	MYRIAM FRIDMAN	_
, <u> </u>	(Name of Registered Agent)	•
hereby resigns as Registered Agent	for PAMPA BRAVA CORP	
	(Name of Corporation)	_,
P10000040847		
(Document Number, if known)		
A copy of this resignation was maile	ed to the above listed corporation at its last known address.	•
The agency is terminated and the of	fice discontinued on the 31st day after the date on which	
this statement is filed.	(Signature of Resigning Agent)	
If signing on behalf of an entity:		밀
N/A	(Typed or Printed Name)	SECRET
	(Typed or Printed Name)	SA CANTE
N/A		RPORAT
	(Capacity)	<u></u> ∃

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