## P100000044239

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bı	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
,		

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## **COVER LETTER**

10:	Division of Corporations
SUBJ	ECT: MINIATURE TAPAS CUISINE CORAL GABLES, INC.
	(Name of Corporation)
DOC	JMENT NUMBER: P10000044239
The er	aclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
ARM	IANDO M. MARTINEZ
	(Name of Person)
DEM	IOS GLOBAL GROUP, INC.
	(Name of Firm/Company)
1111	BRICKELL AV. SUITE 1100
	(Address)
MIA	∕II, FL 33131
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
ARM	ANDO M. MARTINEZ  (Name of Person)  at (305) 670-0979  (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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,
Plorida Statutes, the undersigned, DEMOS GLOBAL GROUP, INC.
(Name of Registered Agent)
ereby resigns as Registered Agent for MINIATURE TAPAS CUISINE CORAL GABLES, (Name of Corporation)
P10000044239
(Document Number, if known)
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 his statement is filed.  Signiture of Resigning Agent)  f signing on behalf of an entity:
(Typed or Printed Name)
Capacity)  72 MAR 30 PH
Fee for filing this document: \$87.50 - Active corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/