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T. LEMIEUX

Mary

COVER LETTER

Division of Corporations
SUBJECT: MIJU, GR. (Name of Corporation)
DOCUMENT NUMBER: 7/2000084120
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:
Name of Person)
(Name of Person)
Suarez VIGA & ASSOCIATES. (Name of Firm/Company)
(Name of Firm/Company)
25 SE 2Nd AVE Suite \$ 410 (Address)
Malin Fl 33131
(City/State and Zip Code)
For further information concerning this matter, please call:
JOSE VIGA at (305) 539-9050 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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

TO:

Amendment Section

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections $60/.0502(2)$, $61/.0502(2)$, $60/.1509$, or $61/.1509$,
Florida Statutes, the undersigned, MARTA B. TIGUEROA (Name of Registered Agent)
hereby resigns as Registered Agent for MIJU COPP. (Name of Corporation)
712000084120
(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. (8ignature 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withdrawn corporation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