P130000000184

(Requestor's Name)	
(Address)	
(
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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COVER LETTER

Division of Corporations
SUBJECT: AMERIVEN CARGO LINE INC (Name of Corporation)
DOCUMENT NUMBER: P 130000 6 784
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:
BENITO R GONEZ. (Name of Person)
AMERIVEN CARGO LINE INC. (Name of Firm/Company)
8358 NW 68 STREET (Address)
HIAMI FL: 33166 (City/State and Zip Code)
For further information concerning this matter, please call:
BENITO GOMEZ at (786) 9000123 (Name of Person) (Area Code & Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations

TO:

Amendment Section

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.



August 6, 2013

BENITO R. GOMEZ AMERIVEN CARGO LINE, INC. 8358 NW 68 ST. MIAMI, FL 33166

SUBJECT: AMERIVEN CARGO LINE, INC. Ref. Number: P13000006784

We have received your document for AMERIVEN CARGO LINE, INC.. However, the document has not been filed and is being returned for the following:

No check was enclosed.

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

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 513A00018821

Irene Albritton Regulatory Specialist II

www.sunbiz.org

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.15	09,
Florida Statutes, the undersigned, MUFID J SOUK! (Name of Registered Agent)	
hereby resigns as Registered Agent for AMERIVEN CARGO LING (Name of Corporation)	F INC.
(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 this statement is filed.	which
HIRAM BERNAL Notary Public - State of Florida My Comm. Expires Feb 15, 2015 (Signature of Resigning Agent)	
Commission # EE 64837 Freigning on behalf of arrendy:	
(Typed or Printed Name)	
	13 E
(Capacity)	§ 20 f

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