P1300016019

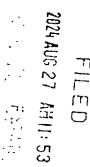
(Requestor's Name)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section
Division of Corporations
SUBJECT: CARIBBEAN STONE CONSTRUCTION INC
(Name of Corporation)
DOCUMENT NUMBER: P13000016019
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:
CRISTIAN S HENRIQUEZ
(Name of Person)
CARIBBEAN STONE CONSTRUCTION INC
(Name of Firm/Company)
7135 COLLINS AVE 1411
(Address)
MIAMI BEACH FL 33141
(City/State and Zip Code)
For further information concerning this matter, please call:
GUILLERMO GALVEZ at (786) 202-6882
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street. Suite 810
Tallahassee. FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

FILED 2024 AUG 27 AM 11: 53

	ections 607.0503(2), 617.0502(2), 607.1509, or 617.1509.
Florida Statutes, the undersign	ed. GUILLERMO GALVEZ
C	(Name of Registered Agent)
hereby resigns as Registered A	gent for CARIBBEAN STONE CONSTRUCTION INC
	(Name of Corporation)
P13000016019	
(Document Number, if know	vn)
A convert this resignation was	mailed to the above listed corneration at its last known address
A copy of this resignation was	mailed to the above listed corporation at its last known address
	<u>-</u>
The agency is terminated and t	mailed to the above listed corporation at its last known address the office discontinued on the 31st day after the date on which
The agency is terminated and t	he office discontinued on the 31st day after the date on which
The agency is terminated and t	<u>-</u>
•	he office discontinued on the 31st day after the date on which
The agency is terminated and the this statement is filed.	he office discontinued on the 31st day after the date on which (Signature of Resigning Agent)
The agency is terminated and the this statement is filed.	he office discontinued on the 31st day after the date on which (Signature of Resigning Agent)
The agency is terminated and t	he office discontinued on the 31st day after the date on which (Signature of Resigning Agent)
The agency is terminated and the this statement is filed.	he office discontinued on the 31st day after the date on which (Signature of Resigning Agent)

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

(Capacity)

COVER LETTER

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CARIBRE AN STONE CONSTRUCTION DIS	
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(Name of Corporati	ion)
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CRISTIAN S HENRIQUEZ	-
(Name of Person)	
CARIBBEAN STONE CONSTRUCTION INC	
(Name of Firm/Company)	•
7135 COLLINS AVE 1411	
(Address)	,
MIAMI BEACH FL 33141	
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Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TO:

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

FILED 2024 AUG 27 AMII: 53

A STATE OF THE STA
Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned. GUILLERMO GALVEZ
(Name of Registered Agent)
hereby resigns as Registered Agent for CARIBBEAN STONE CONSTRUCTION INC
(Name of Corporation)
P13000016019
(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.
(Signature of Resigning Agent)
If signing on behalf of an entity:
(Timed or Drived Normal
(Typed or Printed Name)
(Capacity)

Fee for filing this document: S87.50 - 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