P13000020773

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	dress)	<u></u>
(Cit	ty/State/Zip/Phone	e #)
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10.	Division of Corporations	
SUBJ	RAMIREZ INTERNATIONAL & M	ULTIPLE SERVICES INC
GUD9.	(Name of Corp	oration)
DOC	UMENT NUMBER; P13000020773	
The er	nclosed Resignation of Registered Agent for a Con	poration and fee are submitted for filing.
Please	return all correspondence concerning this matter	to the following:
EV	IS RAMIREZ	
	(Name of Person)	
RAMIR	REZ INTERNATIONAL & MULTIPLE SRVICES INC	
	(Name of Firm/Company)	
198	34 EAST 4TH AVENUE	
	(Address)	_
HIA	LEAH, FL 33010	
	(City/State and Zip Code)	_
For fu	rther information concerning this matter, please ca	di:
EVI	IS RAMIREZ at (305	⁴⁰³ -3328
	(Name of Person) at (403-3328 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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,
Florida Statutes, the undersigned, YOSELIN M SARANTE BRETON
(Name of Registered Agent)
hereby resigns as Registered Agent for RAMIREZ INTERNATIONAL & MULTIPLE SERVICES INC
(Name of Corporation)
P13000020773
(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:
(Typed or Printed Name)
If signing on behalf of an entity: (Typed or Printed Name)

Fee for filing this document: \$87.50 - Active Corporation

\$35.00 - 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withdrawn corporation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