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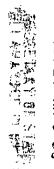
(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: VIP Claims (Name of Corporation)
DOCUMENT NUMBER: P130000 33808
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:
GEORGINA MUNS
(Name of Person)
VIP claims
(Name of Firm/Company)
13200 SW 128 AUR D3
(Address)
MIAMI, FC 33186 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
GRORGINA MUNS at (305) 772-6403 (Name of Person) (Area Code & Daytime Telephone Number)
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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, GEORGINA NUNS			-	
(Name of Registered Agent)				
hereby resigns as Registered Agent for VIP Claims INC (Name of Corporation)			-	
(Document Number, if known)				
A copy of this resignation was mailed to the above listed corporation at its last known	own ad	dress	•	
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.				
Hengua Muus (Signature of Resigning Agent)	.2%.			
(Signature of Resigning Agent)	Mark of	ci.		
If signing on behalf of an entity:	E F	3 CT 21	THE MAN	
<i>₩</i>		HA AM		
(Typed or Printed Name)		9: 30	land.	
N/A		Û		
(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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