P13000037299

(Re	questor's Name)	
(Ad	dress)	
,	,	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
	WAIT	MAIL
/Pu	siness Entity Nan	
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
r		
Special Instructions to	Filing Officer:	
L		

Office Use Only

*

,

500406846025

04/20/23--01018--004 **35.00

2023 APR 20 AM 11: 33

Ra Resignation

JUL 21 2023 D CUSHING

COVER LETTER

TO: Amendment Section **Division of Corporations**

THE BLUE 1501, INC. SUBJECT:

(Name of Corporation)

DOCUMENT NUMBER: P13000037299

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:

DAIRIS ESTRADA

(Name of Person)

PIEDRA & COMPANY CPA PA

(Name of Firm/Company)

8950 SW 74 CT STE 1606

(Address)

MIAMI, FLORIDA 33156

(City/State and Zip Code)

For further information concerning this matter, please call:

DAIRIS ESTRADA 305 671-0003 at ((Area Code & Davtime Telephone Number) (Name of Person)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

2023 APR 20

7

မ္မ

1

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60)7.0503(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned,	DRA & COMPANY CPA PA	
Florida Statutes, the undersigned,	(Name of Registered Agent)	
hereby resigns as Registered Agent for	THE BLUE 1501, INC.	
nereby resigns as registered Agencion	(Name of Corporation)	
P13000037299		
(Document Number, if known)	_	
A copy of this resignation was mailed to	the above listed corporation at its last known ad	ldress.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date-on-wh	ĩich
	mature of Resigning Agent)	
If signing on behalf of an entity:		
AURELIO A PIEDRA		2023 APR
(Typed or Printed Name)	A B
REGISTERED AGENT		R 20
	(Capacity)	At
	· · · ·	=
		AH 11: 33

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

. .