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**Division of Corporations**  
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**REGISTERED AGENT RESIGNATION**  
**LITTLE HAVANA MEDICAL, INC.**

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## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, ELIEL REYES

(Name of Registered Agent)

hereby resigns as Registered Agent for LITTLE HAVANA MEDICAL, INC.

(Name of Corporation)

P14000070296

(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.

(X)

(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
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