# P14000078885

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S. PRATHER

#### **COVER LETTER**

	Amendment Section Division of Corporation	ons	
SURIF	ANELCO	INVESTMENT CORP	
001332		(Name of Co	orporation)
DOCU	MENT NUMBER:	P14000078885	
The end	closed Resignation of	Registered Agent for a C	Corporation and fee are submitted for filing.
Please r	eturn all corresponder	nce concerning this matt	ter to the following:
LUIS	ROSALES		
	(Name	of Person)	· <del></del>
EXEC	CUTIVE TAX SERVICE	INC	
<del></del> ,	(Name of F	irm/Company)	
5931	NW 173DR # 9		
	(Ad	ldress)	
MIAN	M1, FL 33015		
	(City/State	and Zip Code)	<del></del>
For furt	her information conce	erning this matter, please	e call:
LUIS	ROSALES	95 at (	243-6742 ) ea Code & Daytime Telephone Number)
	(Name of Perso	on) (Arc	ea 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 Tallahassec, 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

Pursuant to the provisions of sections 60	07.0503(2), $617.0502(2)$ , $607.1509$ , or $617.1509$ ,
Florida Statutes, the undersigned,	LUIS ROSALES
_	(Name of Registered Agent)
hereby resigns as Registered Agent for	ANELCO INVESTMENT CORP
netery resigns as registered regain for	(Name of Corporation)
P14000078885	
(Document Number, if known)	
A copy of this resignation was mailed to	o the above listed corporation at its last known address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which
	and the second
(Ši	gnature of Resigning Agent)
If signing on behalf of an entity:	gnature of Resigning Agent)
	(Typed or Printed Name)
,	(Typed or Printed Name)
<del></del>	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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