

PI4000093515

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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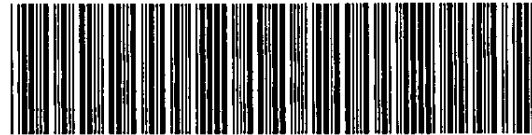
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 12 2017

T. LEMIEUX

Handwritten signature

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SOUTH CAPITAL ONE CORP
(Name of Corporation)

DOCUMENT NUMBER: P14000093515

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:

MARCELA BOTTINELLI
(Name of Person)

MB7 CORPORATE SERVICES LLC
(Name of Firm/Company)

1110 BRICKELL AVE, SUITE 804
(Address)

MIAMI, FL. 33131
(City/State and Zip Code)

For further information concerning this matter, please call:

MARCELA BOTTINELLI at (305) 503-2700 Ext 104
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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, MB7 CORPORATE SERVICES LLC
(Name of Registered Agent)

hereby resigns as Registered Agent for SOUTH CAPITAL ONE CORP
(Name of Corporation)

PI4000093515
(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:

MARCELA BOTTINELLI
(Typed or Printed Name)

MGR
(Capacity)

Fee for filing this document:

\$87.50 - Active Corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

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Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314