P15000004672

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | ısiness Entity Nar | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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SUPERE TARY OF STATE OR SINTERED TO STATE OR COMPORATIONS

Ra Risignation

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COVER LETTER

| SUBJECT: Santa Maria Resources Overseas Inc. (Name of Corporation) | |
|---|-----------------|
| DOCUMENT NUMBER: P15000004672 | |
| The enclosed Resignation of Registered Agent for a Corporation and fee are submitted | ted for filing. |
| Please return all correspondence concerning this matter to the following: | |
| Cesar Clavero | |
| (Name of Person) | |
| | 1 |
| (Name of Firm/Company) | |
| 1234 South Dixie Highway, # 329 | |
| (Address) | • |
| Coral Gables, FL 33146 | |
| (City/State and Zip Code) | |
| For further information concerning this matter, please call: | |
| Cesar Clavero (Name of Person) at (305) 490 0005 (Area Code & Daytime Telephone Nu | |

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

| Florida Statutes, the undersigned, New Heaven Agent Overseas Inc. (Name of Registered Agent) hereby resigns as Registered Agent for Santa Maria Resources Overseas Inc. (Name of Corporation) P1500004672 (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) (Signature of Resigning Agent) The signing on behalf of an entity: Jose Maria Carneiro da Cunha (Typed or Printed Name) President | Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.15 | 509, or 617.1509, | |
|---|--|---------------------------------------|--|
| hereby resigns as Registered Agent for Santa Maria Resources Overseas Inc. P15000004672 (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: Jose Maria Carneiro da Cunha (Typed or Printed Name) President | Florida Statutes, the undersigned New Heaven Agent Oversea | ıs Inc. | |
| P1500004672 (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) (Signature of Resigning Agent) President President | (Name of Registered Agent) | | |
| (Name of Corporation) P1500004672 (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) Jose Maria Carneiro da Cunha (Typed or Printed Name) President | hereby resigns as Registered Agent for Santa Maria Resources | Overseas Inc. | |
| (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: Jose Maria Carneiro da Cunha (Typed or Printed Name) | (Name of Corporati | on) | |
| (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: Jose Maria Carneiro da Cunha (Typed or Printed Name) | P15000004672 | | |
| 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: Jose Maria Carneiro da Cunha (Typed or Printed Name) President | | | |
| If signing on behalf of an entity: Jose Maria Carneiro da Cunha (Typed or Printed Name) President | A copy of this resignation was mailed to the above listed corporation at | its last known address. | |
| If signing on behalf of an entity: Jose Maria Carneiro da Cunha (Typed or Printed Name) President 77 77 77 77 77 77 77 77 77 77 77 77 7 | this statement is filed. | ter the date on which | |
| Jose Maria Carneiro da Cunha (Typed or Printed Name) President | (Signature of Resigning Agent) | i i i i i i i i i i i i i i i i i i i | |
| Jose Maria Carneiro da Cunha Cityped or Printed Name Cityped or | If signing on behalf of an entity: | 7 66 | |
| President 39 7 | | <u>na</u> 2 | |
| | (| T Con | |
| (************************************** | President (Capacity) | 1: 36 | |

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