

P15000057084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

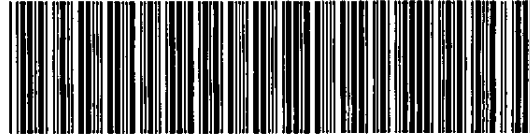
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

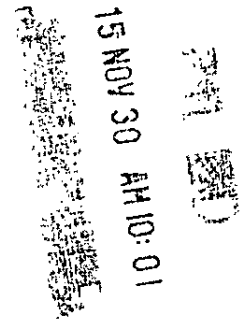
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C McNAIR

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Miami Biz Corp  
(Name of Corporation)

**DOCUMENT NUMBER:** P15000057084

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:

Salvatore de Luca

(Name of Person)

(Name of Firm/Company)

1325 Nw. 98 Ct # 5

(Address)

Doral, Fl 33172

(City/State and Zip Code)

For further information concerning this matter, please call:

Salvatore de Luca

(Name of Person)

at

305

(Area Code & Daytime Telephone Number)

471-1010

~~704-3831~~

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Carlos Roberto G. Ribeiro, hereby resign as President  
(Title)

of Miami Biz, Corp  
(Name of Corporation)

P15000057084, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314