P15000074770

(Requestor's Name)		
(Address)		
,		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Dusiness Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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of 8/25/2022

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT:	
(Name of Corporat	ion)
DOCUMENT NUMBER:	
The enclosed Resignation of Registered Agent for a Corpor	ation and fee are submitted for filing.
Please return all correspondence concerning this matter to t	he following:
Carlos Aguilar Esquire	
(Name of Person)	-
Law Office of Carlos Aguilar	
(Name of Firm/Company)	-
3760 Bird Road Unit 404	
(Address)	-
Miami FL 33146	
(City/State and Zip Code)	-
For further information concerning this matter, please call:	
Yesenia Guerrero 847 at (420-9483
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, 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 607.0503(2), 617.0502(2), 607.15	09, or 617.1509.
Florida Statutes, the undersigned, Carlos Aponte (Name of Registered A	gent)
· · · · · · · · · · · · · · · · · · ·	genty
hereby resigns as Registered Agent for Gold Coast Cars Corp	
(Name of Corporation	on)
P 15000074770	
(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 aft this statement is filed.	er the date on which
(Signardre of Resigning Agent)	
If signing on behalf of an entity:	202
CARLOS A APOINTE (Typed or Printed Name)	2022 JUN - 9
PRE SIDEPT	9 PH · ·
(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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