## 6000016272

| (Re                     | questor's Name)   | <del> </del> |
|-------------------------|-------------------|--------------|
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| (Cit                    | y/State/Zip/Phone | e #)         |
| PICK-UP                 | ☐ WAIT            | MAIL         |
| (Bu                     | siness Entity Nar | me)          |
| (Do                     | cument Number)    |              |
| Certified Copies        | _ Certificates    | s of Status  |
| Special Instructions to | Filing Officer:   |              |
|                         |                   |              |
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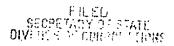
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## **COVER LETTER**

| Division of Corporations  |
|---|
| SUBJECT: LgAg CONSULTING GROUP INC. (Name of Corporation)   |
| DOCUMENT NUMBER: P16000016272   |
| 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:   |
| Lissette Guerra (Name of Person)  |
| LgAg Consulting Group Inc. (Name of Firm/Company)   |
| 16850 Collins Ave. suite# 112-481<br>(Address)  |
| SUNNY ISLES BEACH, FLONIDA 33160<br>(City/State and Zip Code)   |
| For further information concerning this matter, please call:  |
| Lissette Guerra at (786) 54-0283 (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of State for \$87.50 for an active cor or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 corporation



## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

16 MAR 14 AM 9: 22

| Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,   |
|---|
| Florida Statutes, the undersigned, ARTURO 6. GUERRA (Name of Registered Agent)  |
| hereby resigns as Registered Agent for LgAg CopsulTing Group Inc. (Name of Corporation)   |
| P 16000016272 (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)  |
| If signing on behalf of an entity:  |
| Arturo G. Guerra (Typed or Printed Name)  |
| Registered Agent (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