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SECRETANT OF STATE

TALLAHASSE FLORIDA:

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CG Pavers Corp. (Name of Corporation)
DOCUMENT NUMBER: P16000058196
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:
Luisa Sanchez (Name of Person)
·
LS According & Tax Sernces (Name of Firm/Company)
16831 NE 15th Ave. (Address)
N. Miami Beach, FC 33162 (City/State and Zip Code)
For further information concerning this matter, please call:
Luisa Sanchez at (305) 205-4203 (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 co

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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, Luisa S. Sanchez (Name of Registered Agent)
hereby resigns as Registered Agent for CG Pavers Corp. (Name of Corporation)
P160000 S8196 (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. Compared to the 31st day after the date on which this statement is filed. Compared to the 31st day after the date on which this statement is filed. Compared to the 31st day after the date on which this statement is filed. Compared to the 31st day after the date on which this statement is filed. Compared to the 31st day after the date on which this statement is filed. Compared to the 31st day after the date on which this statement is filed. Compared to the 31st day after the date on which this statement is filed. Compared to the 31st day after the date on which this statement is filed. Compared to the 31st day after the date on which this statement is filed. Compared to the 31st day after the date on which this statement is filed. Compared to the 31st day after the date on which the 31st day after the 31st day after the date on which the 31st day after the 31st day
If signing on behalf of an entity:
(Typed or Printed Name)
(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