

# Florida Department of State

## Division of Corporations

### Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : ALONSO & GARCIA, P.A.  
Account Number : I20020000031  
Phone : (305) 448-3898  
Fax Number : (305) 443-9073

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: 002142@Alonso-Garcia.com

SECRETARY OF STATE  
2019 JUL -5 AM 9:09

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## REGISTERED AGENT RESIGNATION

### DI POMPEI INC.

S. TALLENT

JUL 08 2019

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

R/A-Resign

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**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, ALONSO & GARCIA, P.A.

(Name of Registered Agent)

hereby resigns as Registered Agent for DI POMPEI INC.

(Name of Corporation)

P16000083399

(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:

DOMINGO ALONSO

(Typed or Printed Name)

President

(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withdrawn corporation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

SECRETARY OF STATE  
TALLAHASSEE, FL

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