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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: E & F LATIN CROUP LLC

Account Number : 120160000049 Phone

: (954)304-8565

Fax Number

: (954)385-5175

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

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REGISTERED AGENT RESIGNATION **HMML CORP**

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT; HMML CORP
(Name of Corporation)
DOCUMENT NUMBER: P17000000637
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:
DIEGO FIGUEROA
(Name of Person)
E & F LATIN GROUP LLC
(Name of Firm/Company)
1820 N CORPORATE LAKES BLVD STE109
(Address)
WESTON FL 33326
(City/State and Zip Code)
For further information concerning this matter, please call:
DIEGO FIGUEROA gt (954) 384 8565
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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,

lorida Statutes, the undersigned, E&F LATIN GROUP LLC	
(Name of Registered Agent)	
ereby resigns as Registered Agent for E & F LATIN GROUP LLC	
(Name of Corporation)	
17000000637	
(Document Number, if known)	
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 his statement is filed.	
(Signature of Resigning Agent)	
signing on behalf of an entity:	2
DIEGO FIGUEROA	
(Typed or Printed Name)	
REGISTERED AGENT	
(Cupucity)	

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withdrawn corporation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
Taliahassee, FL 32314