

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:			
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Office Use Only

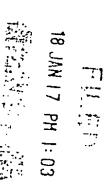


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R. WHITE JAN 19 2018



COVER LETTER

SUBJECT: WORLD PREFERENCE FOOD	S TRADERS, CORP.
(Name of Corpora	ation)
DOCUMENT NUMBER: P17000068299	
The enclosed Resignation of Registered Agent for a Corpo	oration and fee are submitted for filing
Please return all correspondence concerning this matter to	the following:
Alvaro Castillo B.	_
(Name of Person)	
Alvaro Castillo B., P.A.	
(Name of Firm/Company)	-
1390 Brickell Ave. Suite 200	
(Address)	
Miami, FL 33129	
(City/State and Zip Code)	-
For further information concerning this matter, please call	:
Alvaro Castillo 305	371-5540 de & Daytime Telephone Number)
(Name of Person) (Area Coo	de & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 6321

Tallahassee, FL 32314

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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, Alvaro Munoz
(Maine of Registered Agent)
hereby resigns as Registered Agent forWORLD PREFERENCE FOODS TRADERS CORP.
(Name of Corporation)
P17000068299
(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:
Alvavo Munoz (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