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COVER LETTER

Division of Corporations			
SUBJECT: LUIS F. ORTIZ	INC.		
	(Name of Corpora	tion)	
DOCUMENT NUMBER: P180000	58408		
The enclosed Resignation of Registered	Agent for a Corpor	ration and fee are submitted for fil	ing.
Please return all correspondence concer	ming this matter to t	the following:	
United States Corporation	n Agents, Inc		
(Name of Person)		_	
Legalzoom.com, Inc.			
(Name of Firm/Compa	ny)	-	
9900 Spectrum Dr.			
(Address)	<u>.</u>	_	
Austin, TX 78717			
(City/State and Zip Co	de)	_	
For further information concerning this	matter, please call:		
Kasandra Lund	at (800	773-0888 x3951	
(Name of Person)	(Area Cod	e & Davtime Telephone Number)	

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

TO: Amendment Section

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	1.1509.
Florida Statutes, the undersigned. United States Corporation Agents, Inc.	٥.
(Name of Registered Agent)	
hereby resigns as Registered Agent for LUIS F. ORTIZ INC. (Name of Corporation)	
(Name of Corporation)	
P18000058408	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known	own address.
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	on which
(Signature of Resigning Agent)	
If signing on behalf of an entity:	
Cheyenne Moseley	
(Typed or Printed Name)	s ~
Assistant Secretary	018 OCT SECRETA
(Capacity)	2018 OCT 23 AM II: SECRETARY OF STA
Fee for filing this document: \$87.50 - Active Corporation	FATE

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/