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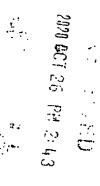
| (| (Requestor's Name) |
|----------------------|--------------------------|
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| PICK-UP | WAIT MAIL |
| (| (Business Entity Name) |
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FLORIDA RESEARCH & FILING SERVICES, INC.

1211 CIRCLE DR

TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE ATTACHED RESIGNATION OF REGISTERED AGENT FOR:

CARIBE BAY SHIPHOLDING INC.

PLEASE RETURN A STAMPED COPY

CHECK# 8785 FOR: \$105.00

(\$35.00 for this filing)

THANK YOU!

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, ATRIUM REGISTERED AGENTS, INC. |
| (Name of Registered Agent) |
| hereby resigns as Registered Agent for CARIBE BAY SHIPHOLDING, INC. |
| (Name of Corporation) |
| P18000101916 |
| (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: |
| FELIPE FRIAS (Typed or Printed Name) 7200 720 720 720 720 720 720 7 |
| (Typed of Finited (vaine) |
| VICE 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\$35.00 - Administratively dissolved/voluntarily dissolved/withdrawn corporation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