

6/25/2020

Division of Corporations

Florida Department of State

Division of Corporations

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Division of Corporations
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Account Name : CARLTON FIELDS
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**REGISTERED AGENT RESIGNATION
MIRACLE LEAF HEALTH CENTERS, CORP.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$87.50

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TALLAHASSEE, FL

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**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, CF REGISTERED AGENT, INC.

(Name of Registered Agent)

hereby resigns as Registered Agent for MIRACLE LEAF HEALTH CENTERS, CORP.

(Name of Corporation)

P19000039910

(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.

Joyce F. Bentubo
(Signature of Resigning Agent)

If signing on behalf of an entity:

JOYCE F. BENTUBO

(Typed or Printed Name)

DIRECTOR/SECRETARY

(Capacity)

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SECRETARY OF STATE
TALLAHASSEE, FL.

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withdrawn corporation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

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