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SECRETARY OF STATE
TALLAHASSEC, FL

Ra Risignation

AUG 1 5 2023 D CUSHING

COVER LETTER

Division of Corporations					
REDIVENCA USA CORP					
(Na	ame of Corpo	oration)			
DOCUMENT NUMBER: 84-4317349					
The enclosed Resignation of Registered Agen	nt for a Corp	poration and fee are su	ubmitted for fil	ling.	
Please return all correspondence concerning t	his matter t	o the following:			
Andrea Uzcategui					
(Name of Person)					
Redivenca USA Corp			⊉0 30 30	2023 JUL 05	
(Name of Firm/Company)			RET	<u> </u>	-19
6800 collins ave			ARY	20	
(Address)			25.55 10.55	PH	fames:
Miami Beach 33141			25	2: 04	
(City/State and Zip Code)		 -	•	Ŧ	
For further information concerning this matter	r, please cal	1:			
Andres Perez	202 at (8486773			
(Name of Person)		ode & Daytime Telepho	ne 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of secti	ons 607.0503(2), 617.0502(2), 607.1509,	or 617.1509,	
Florida Statutes, the undersigned,	Andres Perez		
	(Name of Registered Agent)		
hereby resigns as Registered Agen	Redivenca USA Corp		
noteby resigns as registered riger	(Name of Corporation)		
84-4317349			
(Document Number, if known)			
A copy of this resignation was ma	iled to the above listed corporation at its I	ast known address.	
The agency is terminated and the chis statement is filed.	office discontinued on the 31st day after the	he date on which	
and	(Signature of Resigning Agent)	2023 JUL 05 SECRETAR	
	(Signature of Resigning Agent)		
If signing on behalf of an entity:		SA 5	
in signing on semin or an entry.		555 m 17	
Andres Perez		(10) III	
	(Typed or Printed Name)	FR 2: 04 ASSECUE	
		111 +	
Secretary			
 	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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