P21000103554

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| Certified Copies | Certificates | of Status |
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| Special Instructions to F | Elling Officer: | - |
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COVER LETTER

| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: Estevez be international Corp (Name of Corporation) |
| DOCUMENT NUMBER: P21000 to 3554 |
| The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Graterol Jose 6 (Name of Person) |
| (Name of Firm/Company) |
| 3703 Esterona AV (Address) |
| DORAL #1 33178 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| (Name of Person) at (£16) 306 32 30 (Area Code & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation. |

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassec. FL 32314 **Street Address:**

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 10, 2023

JOSE G GRATEROL 3703 ESTEPONA AVE DORAL, FL 33178

SUBJECT: ESTEVEZ JOR INTERNATIONAL CORP.

Ref. Number: P21000103554

2023 NOV -1 PM 1: 21

We have received your document for ESTEVEZ JOR INTERNATIONAL CORP, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$87.50.

The form you submitted is for a FLORIDA LIMITED LIABILITY COMPANY, but your entity is a FLORIDA PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Letter Number: 223A00023476

Neysa Culligan Regulatory Specialist III

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. VIDA Financial Group (Name of Registered Agent) | | _ | |
| hereby resigns as Registered Agent for ESTEVEZ JOE Internation (Name of Corporation) | nal c | OR P |) |
| (Document Number, if known) | | | |
| A copy of this resignation was mailed to the above listed corporation at its last known | wn addres | ss. | |
| The agency is terminated and the office discontinued on the 31st day after the date this statement is filed. | on which | | |
| (Signatura of Resigning Agent) | TAC. | 2023 | |
| If signing on behalf of an entity: | TALLAHÁSSE | 2023 NOV - 1 | |
| (Typed or Printed Name) | E, FLORIDI | PH 1: 55 | |
| (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