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From;

Account Name : BILZIN, SUMBERG BAENA PRICE & AXELROD LLP.

Account Number : 075350000132

Phone

: (305)374-7580

Fax Number

: (305)350-2446

REGISTERED AGENT RESIGNATION

CAFE MIAMI, INCORPORATED

Certificate of Status	0
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RESIGNATION OF REGISTERED AGENT

Florida Statutes, the undersigned, MTTCHELL E. WIDOM. P.A. (Name of registered agent) hereby resigns as Registered Agent for CAFE MIAMI, ENCORPORATED (Name of corporation) 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.	Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 6	507.1509, or 617.1509,
(Name of corporation) 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	Florida Statutes, the undersigned, MITCHELL R. WIDOS	L P.A.
The agency is terminated and the office discontinued on the 31st day after the date on which		
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.	A copy of this resignation was mailed to the above listed corporati	on at its last known address.
(Signature of resigning agent) If signing on behalf of an entity:	this statement is filed. (Signature of resigning agent)	ay after the date on which
MITCHELL E. WIDOM (Typed or Printed Name)		
PRESIDENT (Canacity)		

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

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

CR2E046(9/98)

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