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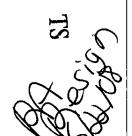
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COVER LETTER

10:	Division of Corporations
SUBJ	ECT: SIPAN CORPORATION
	(Name of Corporation)
DOC	UMENT NUMBER: P39000052267
The er	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing
Please	return all correspondence concerning this matter to the following:
JOS	E MARIA CARNEIRO DA CUNHA
	(Name of Person)
	(Name of Firm/Company)
1900	SW 3RD AVENUE
	(Address)
MIA	MI, FL 33129
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
JOSE	E MARIA CARNEIRO DA CUNHA at (305) 858-1099
	(Name of Person) (Area Code & Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

•	607.0502(2), 617.0502(2), 607.1509, or 617	'.1509,
Florida Statutes, the undersigned,JC	OSE MARIA CARNEIRO DA CUNHA	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for		
, , , , , ,	(Name of Corporation)	
P39000052267		
(Document Number, if known)		
A copy of this resignation was mailed	to the above listed corporation at its last kno	own address.
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day after the date	on which
S	ignature of Resigning Agent)	
If signing on behalf of an entity:		
	(Typed or Printed Name)	waits
	·	8
	(Capacity)	MAY 16
\$87.50 - Ac \$35.00 - Ad	ng this document: tive corporation lministratively dissolved/voluntarily dissolv thdrawn corporation	M 9 38

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