

P95 000091009

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 120000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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**REGISTERED AGENT RESIGNATION
FARIA, INC.**

Certificate of Status	0
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**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned,

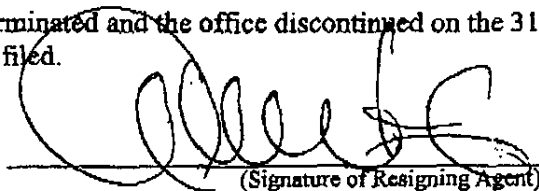
OSCAR A. FARIAS
(Name of Registered Agent)

hereby resigns as Registered Agent for

FARIA, INC.
(Name of Corporation)P95000091009
(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.


(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)_____
(Capacity)FILED
2017 MAY 15 AM 11:08
TALLAHASSEE, FLORIDA**Fee for filing this document:**

\$87.50 - Active Corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporationMake checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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