P96000072261

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	: #)
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TO: Amendment Section Division of Corporations	
SUBJECT: S A T Internation	onal Corp.
	(Name of Corporation)
DOCUMENT NUMBER: P960000	12201
The enclosed Resignation of Registered	Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concer	ning this matter to the following:
Rocael Rodriguez	
(Name of Person)	
(Name of Firm/Compa	ny)
(Address)	
(City/State and Zip Coo	de)
For further information concerning this	matter, please call:
Rocael Rodriguez	7.00
(Name of Person)	at (<u>786</u>) <u>372 1460</u> (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the or \$35.00 for an administratively dissolved.	e Florida Department of State for \$87.50 for an active corporation ved, voluntarily dissolved or withdrawn corporation.
Amendment Section Ar Division of Corporations Di Clifton Building Po	ailing Address: mendment Section vision of Corporations ost Office Box 6327 llahassee, FL 32314

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. Rocael Rodriguez
(Name of Registered Agent)
hereby resigns as Registered Agent for SAT International Corp.
(Name of Corporation)
P96000072261
(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.
- Amo
(Signature of Resigning Agent)
If signing on behalf of an entity:
(Typed or Printed Name)
jrin 🚅 🕌 📆
OT N
(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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