## P97000042328

(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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## **COVER LETTER**

**TO:** Amendment Section

Division of Corporation

**DATE:** February 14 2011

**SUBJECT:** DE VOS INC

**DOCUMENT NUMBER:** P 97000042328

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:

**DONNA M. DELGADO** 

LAW OFFICE OF DONNA M DELGADO 1031 IVES DAIRY ROAD SUITE 228 MIAMI FLORIDA 33179

For further information on this matter, please call:

Donna M Delgado, at 305 654 8202

Enclosed is a check for \$35 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

FILED

## RESIGNATION OF REGISTERED AGENT FEB 18 PM 3: 00 FOR A CORPORATION

	SECRETARY OF STATE TALLAHASSEE, FLORID
Pursuant to the provisions of sections 6	07 0502(2) 617 0502(2) 607 1500 or 617 1500
Florida Statutes, the undersigned,	bunia M DELGADO, ESQ
	(Name of Registered Agent)
hereby resigns as Registered Agent for	DE VOS INIC (Name of Corporation)
P97000042328	
(Document Number, if known)	<del></del>
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which
Mus	Lludo-
(Sig	gnature of Resigning Agent)
If signing on behalf of an entity:	
(7	Typed or Printed Name)

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)