P97000105442

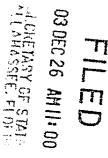
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: LUSEPI CORPORATION (Name of Corporation)
DOCUMENT NUMBER: P97000105442
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:
(Name of Person)
(Name of Firm/Company)
4131 VENTURIO AU. (Address)
MIAM, JL 33133 (City/State and Zip Code)
For further information concerning this matter, please call:
GONEULO FREITAS at (788) 457-3198 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87,50 for an active corporation

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections	s 607.0502(2), 617.0502(2), (607.1509, or 617	7,1509,	_
orida Statutes, the undersigned, FILIFE FREITAS (Name of Registered Agent)				
hereby resigns as Registered Agent f	,	R PORATION		
P97000105442			•	
(Document Number, if known)	-			
A copy of this resignation was maile	d to the above listed corporat	tion at its last kn	own address.	
The agency is terminated and the offithis statement is filed.	ice discontinued on the 31st (day after the date	on which	
			.a	, , , , , , , , , , , , , , , , , , ,
	(Signature of Resigning Agent)		•	
If signing on behalf of an emity:			28 0	
Go	News (FREITAS (Typed or Printed Name)		BDEC 26 CAR PARY LAHASSEI	71
	(1 yped or Frinted Name)		26 / SSEE,	Ë
	Capacity)	TTORNEY)	FSTA FLORE	\Box
	(capacity)		O	

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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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
Taliahassee, FL. 32314