P980000582

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/s	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Nar	ne)
(Доси	ment Number)	
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SECRETARY OF STATE

PARS ...

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: SAGUA LAND CLEARANCE	E, INC.
(Na	ame of Corporation)
DOCUMENT NUMBER: P9800000058	2
The enclosed Resignation of Registered Agen	nt for a Corporation and fee are submitted for filing.
Please return all correspondence concerning t	this matter to the following:
DALIA MELENDEZ	1
(Name of Person)	
(Name of Firm/Company)	"
680 S. MILITARY TRAIL	
(Address)	
WEST PALM BEACH, FL 33415	
(City/State and Zip Code)	A CONTRACTOR OF THE CONTRACTOR
For further information concerning this matter	er, please call:
DALIA MELENDEZ	at (561) 478-1777 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Post of the state of a south and the Plant	11- D

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, DALIA MELENDEZ
(Name of Registered Agent)
hereby resigns as Registered Agent for SAGUA LAND CLEARANCE, INC.
(Name of Corporation)
P9800000582
(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.
(Stanature of Resigning Agent) If signing on behalf of an entity:
DALIA MELENDEZ
(Typed or Printed Name)
(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withdrawn corporation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