000000034698 Register's Vame

JUAN C. AMADOR 18671 NW 78ANG MIAHN. FL. 33015

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

(Corporation Name)	(Document #)	7000031655011 -03/10/0001091006 *****87.50 *****87.50
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4. (Corporation Name) Walk in Pick up time	(Document #) Photocopy	Certificate of Status
Mail out Will wait NEW FILINGS	AMENDMENTS	
 □ Profit □ Not for Profit □ Limited Liability □ Domestication □ Other 	 ☐ Amendment ☐ Resignation of R ☐ Change of Regis ☐ Dissolution/With ☐ Merger 	
OTHER FILINGS	REGISTRATION/C	<i>y</i> ,
☐ Annual Report ☐ Fictitious Name	☐ Foreign ☐ Limited Partner ☐ Reinstatement ☐ Trademark ☐ Other	ship cools of
		Examiner's Initials

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,		
Florida Statutes, the undersigned, JOAN CARLOS ANADOR (Name of registered agent)		
hereby resigns as Registered Agent for <u>ViTACARD WORLOWIDE</u> , TORP. (Name of corporation)		
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) ORDER ORDER ORDER		
(Capacity)		

Fee for filing this document:

\$87.50 - Active corporation
\$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314