

Nov-02

From: Katz Barron Squitiero & Faust, P.A.

3058 70740

P.001/003

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Florida Department of State  
Division of Corporations  
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From:

Account Name : Katz Barron Squitiero Faust  
Account Number : 072627002473  
Phone : (305) 856-2444  
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DIVISION OF CORPORATIONS

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REGISTERED AGENT RESIGNATION

AVENTURA LEASING CORP.

Certificate of Status	0
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### TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** AVENTURA LEASING CORP.

(Name of Corporation)

**DOCUMENT NUMBER:** P99000064327

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:

Anna Krimshtein

(Name of Person)

Katz Barron Squitiero Faust

(Name of Firm/Company)

2699 S. Bayshore Drive, 7th Floor

(Address)

Miami, FL 33133

(City/State and Zip Code)

For further information concerning this matter, please call:

Anna Krimshtein

(Name of Person)

at ( 305 ) 856-2444

(Area Code & Daytime Telephone Number)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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### 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, Corpco, Inc.

(Name of Registered Agent)

hereby resigns as Registered Agent for AVENTURA LEASING CORP.

(Name of Corporation)

P99000064327

(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.

  
(Signature of Resigning Agent)

If signing on behalf of an entity:

Erica L. English  
(Typed or Printed Name)

Vice President

(Capacity)

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04 NOV -3 AM 11:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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

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