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000	ノバご)
Carlos A. Triay, P.A.	
Requestor's Name	
999 Ponce de Ulon B'lod.	
Coval Cagbles FL 33134	
City/State/Zip Phone #	Office Use Only
CORPORATION NAME(S) & DOCUMENT NUM	IBER(S), (if known):
(Corporation Name)	ocument #)

1	(Corporation Name)	(Document #)		- : .:
2	(Corporation Name)	(Document #)	TA SECT	
3	(Corporation Name)	(Document #)	RETIARY AHASSE	3
4	(Corporation Name)	(Document #)	EFE :	
☐ Walk in	Pick up time	Certified Copy	TATE ORIDA	ယ္က ဟ

Photocopy

NEW FILINGS	
Profit	
NonProfit	2
Limited Liability	
Domestication	

☐ Mail out

☐ Will wait

AMENDMENTS
Amendment
Resignation of R.A., Officer/Director
Change of Registered Agent
Dissolution/Withdrawal
Merger

300002462183--8 -03/19/98--01055--028 *****35.00 ******35.00

Certificate of Status

OTHER BULLINGS
Annual Report
Fictitious Name
Name Reservation

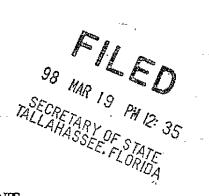
Other

REGISTRATION/ QUALIFICATION.
Foreign
Limited Partnership
Reinstatement
Trademark
Other

Examiner's Initials 3/23



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State



RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections	s 607.0502(2), 617.0502(2), 607.1509, or	617.1509,
Florida Statutes, the undersigned,	CARLOS A. TRIAY, P.A., (Name of registered agent)	
hereby resigns as Registered Agent f	for LUMO RESTAURANT CORPORAT: (Name of corporation)	LON
A copy of this resignation was maile	ed to the above listed corporation at its last l	known address.
The agency is terminated and the off this statement is filed.	fice discontinued on the 31st day after the d	ate on which
	(Signature of resigning agent)	
If signing on behalf of an entity:		
CARLOS A	A. TRIAY	·
	(Typed or Printed Name)	
PRESIDEN	NT.	-
	(Capacity)	

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation