Grau & Company, P.A. Certified Public Accountants 111 N.E. First Street, 5th Floor Miami, Florida 33132-2501 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy ☐ Walk in Pick up time ☐ Will wait Photocopy ☐ Certificate of Status Mail out NEW FILINGS AMENDMENTS **Profit** Amendment Resignation of R.A. Officer/ Director NonProfit Limited Liability Change of Registered Agent *****35.00 *****35.00 Domestication Dissolution/Withdrawal Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign **Fictitious Name** Limited Partnership Name Reservation Reinstatement TL. AUG T 8 1997 Trademark

CR2E031(1/95)

Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 11, 1997

MANUEL M. GARCIA GRAU & COMPANY, P.A., CPA'S 111 N.E. FIRST STREET, 5TH FLOOR MIAMI, FL 33132-2501

SUBJECT: ROCHAIX, INC. Ref. Number: S81961

We have received your document for ROCHAIX, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The filing fee for a resignation of registered agent from an active corporation is \$87.50. There is a balance due of \$52.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6905.

Thelma Lewis
Corporate Specialist Supervisor

Letter Number: 397A00040527

97 AUG 18 AH 8: 19 Division of corporations Florida Department of State, Sandra B. Mortham, Secretary of State

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections of	507.0502(2), 617.0502(2), 607.1509, OF 617.1509,
Florida Statues, the undersigned,	MANUEL M. GARCIA
	(Name of registered agent)
hereby resigns as Registered Agent for	ROCHAIX, INC.
	(Name of corporation)
A copy of this resignation was mailed to	to the above listed corporation at its last known address.
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day after the date on which
Manue	Signature of resigning agent)
If signing on behalf of an entity:	
	(Typed or Printed Name)
	(Capacity)

Fee for filing this document: \$87.50 - Active corporation \$35.00 - Administratively dissolved corporation