

L06000109101

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

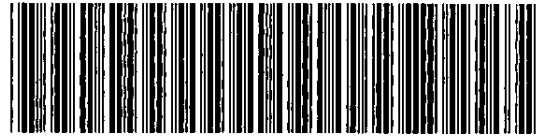
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700112162597

11/13/07--01038--029 **85.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 NOV 13 PM 2:20

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: UED, LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: L06000109101

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maria C. Arriola Vélez
(Name of Person)

Maria C. Arriola Vélez, PA
(Name of Firm/Company)

35 Almeria Avenue
(Address)

Coral Gables, FL 33134
(City/State and Zip Code)

For further information concerning this matter, please call:

Maria C. Arriola Vélez at (305) 461-9223
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MARIA C. ARRIOLA VÉLEZ, P.A.

MARIA C. ARRIOLA VÉLEZ
ATTORNEY AT LAW

35 ALMERIA AVENUE
CORAL GABLES, FL 33134

TELEPHONE: (305) 461-9223

TELECOPIER: (305) 461-9498

E-MAIL: MARIV1235@AOL.COM

November 9, 2007

By Federal Express

State of Florida
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

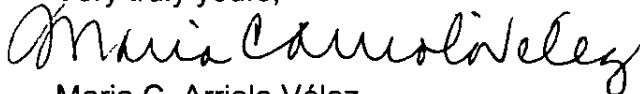
RE: UED, LLC
Doc #L06000109101

Dear Sir/Madam:

Enclosed are:

1. Cover Letter
2. Resignation of Resident Agent
3. Our check for the \$85 fee

Very truly yours,



Maria C. Arriola Vélez

/encls

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

L. Patrick Kelly _____, hereby resigns as
(Name of Registered Agent)

Registered Agent for **UED, LLC** _____

(Name of Limited Liability Company)

L06000109101 _____
(Document Number, if known)

A copy of this resignation was mailed to the above listed limited liability company 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)

(Capacity)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 NOV 13 PM 2:20

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

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