

11/12/2014

# LD7000089849

Division of Corporations

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : PERLMAN, BAJANDAS, YEVOLI, & ALBRIGHT P.L.  
Account Number : 120040000167  
Phone : (305)377-0809  
Fax Number : (305)377-0781

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

### LLC REGISTERED AGENT RESIGNATION LUXURY LIVING OF USA, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$85.00

RECEIVED

14 NOV 12 AM 10:00

FLORIDA DEPARTMENT OF STATE  
BUREAU OF CORPORATE  
REGISTRATION SERVICES

FILED  
14 NOV 12 AM 11:50  
STATE OF FLORIDA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LUXURY LIVING OF USA, LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L07000089849

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:

**SELENA SAMALE**  
Name of Person

**PERLMAN, BAJANDAS, YEVOLI & ALBRIGHT, P.L.**  
Name of Firm/Company

**200 S. ANDREWS AVE. STE 600**  
Address

**FORT LAUDERDALE, FL 33301**  
City/State and Zip Code

**N/A**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**SELENA SAMALE** at ( **954** ) **566-7117**  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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

FILED  
14 NOV 12 11:50  
SELENA SAMALE  
TALLAHASSEE, FLORIDA

### STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

**ANDREA MINNUCCI**, hereby resigns as

Name of Registered Agent

Registered Agent for **LUXURY LIVING OF USA, LLC**

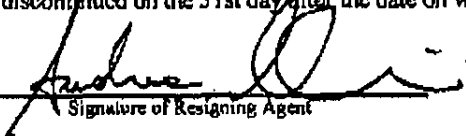
Name of Limited Liability Company

**L07000089849**

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**  
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STATE  
TALLAHASSEE, FLORIDA

**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