

LO8000040857

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

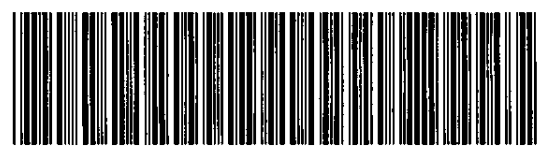
(Business Entity Name)

(Document Number)

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14 MAR 31 AM 10:34
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TALLAHASSEE, FLORIDA

R. WHITE

APR 09 2014

R. WHITE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LIL VENTURE LLC., a Florida limited liability company

Name of Limited Liability Company

DOCUMENT NUMBER: L08000040857

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:

ALEX SHURIS

Name of Person

LIL VENTURE LLC

Name of Firm/Company

17 WEST TERRACE ROAD

Address

GREAT NECK, NY 11021

City/State and Zip Code

alscorp@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NEIL A. MILESTONE

Name of Person

at (305) 6822324

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

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

FELIX FILENGER

, hereby resigns as

Name of Registered Agent

Registered Agent for **LIL VENTURE LLC**

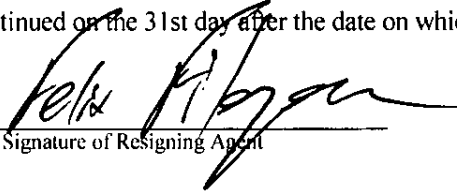
Name of Limited Liability Company

L08000040857

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:

Felix Filenger
Typed or Printed Name

Capacity

FILED
14 MAR 31 AM 10:34
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**