L05 000018207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 JAN 13 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 14 2016

J SHIVERS

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 29, 2015

CORPORATE ACCESS

,

SUBJECT: HELI HOLDINGS, LLC
Ref. Number: L06000022320

RECEIVED
16 JAN 13 PM 4:32
NO ADDITIONAL FEE
IS ACKNOWLEDGE
SUFFICIENCY OF FILING

We have received your document for HELI HOLDINGS, LLC and your check(s) totaling $25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can not file an amendment on an inactive entity.

Please return the corrected original and one copy of 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) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 315A00022878

Abandoned
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CORPORATE ACCESS, INC.

When you need ACCESS to the world

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: GLINDA

☐ CERTIFIED COPY _____

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xx FILING RA resignation

1. KEYS LAND, LLC
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS: _____

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

CORPORATE ACCESS, INC. , hereby resigns as

Name of Registered Agent

Registered Agent for KEYS LAND, LLC

,

Name of Limited Liability Company

L05-18307

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:

DANNY BENNETT

Typed or Printed Name

PRESIDENT

Capacity

FILED
16 JAN 13 AM 8:57
SECRETARY OF 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

INHS17 (2/14)