

U13000122179

(Requestor's Name)

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(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

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J SHIVERS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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2016 MAR 31 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 16, 2016

JOSE MENENDEZ
MENENDEZ LAW FIRM
6701 SUNSET DRIVE #104
MIAMI, FL 33143

SUBJECT: WEST KENDALL SURGICAL CENTER, LLC
Ref. Number: L13000122179

We have received your document for WEST KENDALL SURGICAL CENTER, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 016A00005411

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WEST KENDALL SURGICAL CENTER, LLC
(Name of Corporation)

DOCUMENT NUMBER: L13000122179

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSE MENENDEZ

(Name of Person)

MENENDEZ LAW FIRM

(Name of Firm/Company)

6701 SUNSET DR, #104

(Address)

MIAMI, FL 33143

(City/State and Zip Code)

For further information concerning this matter, please call:

JOSE MENENDEZ at **(305) 445-6500**

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:

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

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

INHS17 (2/14)