

F02000004681

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

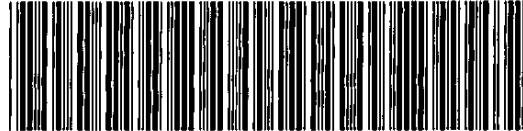
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900113394559

01/30/08--01002--018 \*\*35.00

FILED  
08 JAN 30 AM 11:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA CM  
CM Amend

1-32-08

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Amherst Business Limited Inc.  
(Name of Limited Liability Company)

**DOCUMENT NUMBER:** F02000004681

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:

Connie R. Stephens  
(Name of Person)

Connie R. Stephens, P.A.  
(Name of Firm/Company)

918 A Drew Street  
(Address)

Clearwater FL 33755  
(City/State and Zip Code)

For further information concerning this matter, please call:

Connie R. Stephens, P.A. at ( 727 ) 446-8899  
(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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

✓  
REC'D JAN 17 2008

January 14, 2008

CONNIE R. STEPHENS  
918 A DREW STREET  
CLEARWATER, FL 33755

SUBJECT: AMHERST BUSINESS LIMITED INC.  
Ref. Number: F02000004681

We have received your document for AMHERST BUSINESS LIMITED INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6916.

Carol Mustain  
Regulatory Specialist II

Letter Number: 608A00002720

RECEIVED  
2008 JAN 25 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, Connie R Stephens

(Name of Registered Agent)

hereby resigns as Registered Agent for Amherst Business Limited Inc

(Name of Corporation)

FO2000004681

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation 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.

Connie R Stephens

(Signature of Resigning Agent)

If signing on behalf of an entity:

Connie R Stephens

(Typed or Printed Name)

(Capacity)

**Fee for filing this document:**

\$87.50 - Active corporation

\* \$35.00 - Administratively dissolved/voluntarily dissolved/  
withdrawn corporation

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

FILED  
08 JAN 30 AM 11:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA