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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R. Peterson
10/14/09
TZ

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Nick A. Jones, Architect, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L0500084249

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:

Nick A. Jones
Name of Person

Nick A. Jones, Architect, LLC
Name of Firm/Company

1320 Bowman St.
Address

Clermont, FL 34711
City/State and Zip Code

NJArkitect@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nick A. Jones at (352) 394-4700
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Michael Millhorn

Name of Registered Agent

, hereby resigns as

Registered Agent for The Millhorn Law Firm

13710 US Hwy. 441, Suite 100, Lady Lake, Florida 32159

Name of Limited Liability Company

L0500084249

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:

Michael Millhorn

Typed or Printed Name

Principal

Capacity

FILED
09 OCT -7 PM 12:08
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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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