

LO2000022396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

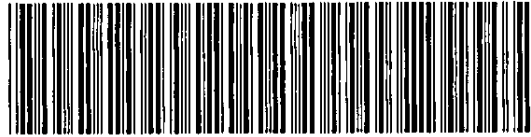
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



900184553389

08/31/10--01007--022 \*\*25.00

RECEIVED  
10 AUG 31 AM 10:57  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
10 AUG 31 AM 11:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S. HAWKES

AUG 31 2010

EXAMINER

# LAZARUS

## CORPORATE FILING SERVICE

3320 SW 87<sup>TH</sup> AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. MOUNT VERNON LLC  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in       Pick up time 2.00       Certified Copy  
 Mail out       Will wait       Photocopy       Certificate of Status

### NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

### AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

### OTHER FILINGS

- Annual Report
- Fictitious Name

### REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER  
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

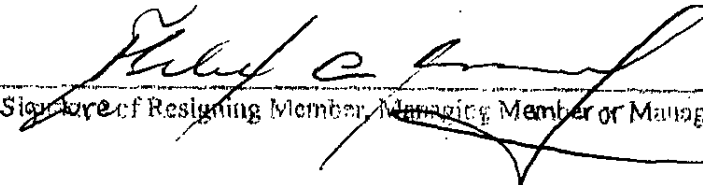
1. The name of the limited liability company as appears on the records of the Florida Department of State is: Mount Vernon LLC

2. This limited liability company was organized under the laws of:  
The State of Florida

3. The Florida document/registration number of this limited liability company is:  
L02000022396

4. I, Felix C Garcia, hereby resign as a Secretary  
*(Print Name of Person Resigning)* *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
Signature of Resigning Member, Managing Member or Manager

Aug. 26/10

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

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10 AUG 31 AM 11:47  
TALLAHASSEE, FLORIDA  
DIVISION OF STATE