

L03000021385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

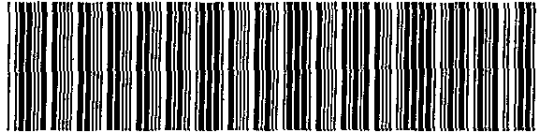
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600047547546

03/17/05--01029--007 **25.00

FILED

2005 MAR -7 PM 12:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L203/09/05

31

WILLIAMSPARKER
HARRISON DIETZ & GETZEN

ATTORNEYS AT LAW
200 SOUTH ORANGE AVENUE
SARASOTA, FLORIDA 34236
T: (941) 536-2037
F: (941) 366-5109
jwagner@williamsparker.com

March 2, 2005

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

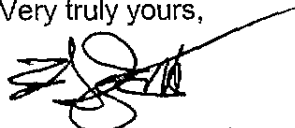
**Re: Jade Ice – WPB, LLC
Resignation of Registered Agent**

Dear Sir/Madame:

Enclosed for filing is a Resignation of Registered Agent for the above-referenced limited liability company, which was administratively dissolved on October 1, 2004. Also enclosed is Williams, Parker, Harrison, Dietz & Getzen check in the amount of \$25.00 in payment of the filing fee.

If you have any questions, please do not hesitate to contact the undersigned.

Very truly yours,



E. John Wagner, II
Attorney at Law

EJW/jmm-623741.1
Enclosures

FILED
2005 MAR -7 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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,

E. John Wagner, II, hereby resigns as
(Name of Registered Agent)

Registered Agent for JADE ICE - WPB, LLC

(Name of Limited Liability Company)

L03000021385

(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:

(Typed or Printed Name)

(Capacity)

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

FILED
2005 MAR -7 PM 12: 22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA