## L03000027468

(Requestor's Name)					
(Address)					
(Ad	dress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
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## TRANSMITTAL LETTER

July 16, 2004

TO: Amendment Section Division of Corporations		July	y 16, 2004
-			
SUBJECT: Elite Fishing, LLC	A -		
	(Name of Limited Liab	ility Company)	
DOCUMENT NUMBER: L030	000027468	<u> </u>	<del></del>
The enclosed Resignation of Register filing.	stered Agent for a Lim	ited Liability Compar	ny and fee are submitted
Please return all correspondence c	oncerning this matter t	to the following:	
Mary F. Fendle, Paralegal			
(Name of Pe	rson)		
Dean Mead			
(Name of Firm/C	Company)		
P. O. Box 2346			
(Address	5)		
Orlando, FL 32802-2346			
(City/State and 2	Zip Code)	_	
For further information concerning	g this matter, please ca	11:	
Mary Fendle	at ( 407 (Area (	, 428-5119	
(Name of Person)	(Area (	Code & Daytime Telepl	none Number)
Enclosed is a check made payable liability company or \$25.00 for an liability company.	to the Florida Departn administratively disso	nent of State for \$85.0 lived, voluntarily diss	00 for an active limited olved or withdrawn limited
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corpora 409 E. Gaines Street Tallahassee, FL 32	ations et	_

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of secti	ion 608.416(2) or 608.509, Fl	orida Statutes, the undersig	ned,
Dean Mead Services, LLC	Registered Agent)	, hereby resigns	as
Registered Agent forElite Fish	hing, LLC		<del> </del>
	(Name of Limited Liability Compa	any)	<del></del>
L03000027468			
(Document Number, if know	n)	•	
A copy of this resignation was ma  The agency is terminated and the DEAN ME  By: De  By:	office discontinued on the 31	st day after the date on which	
If signing on behalf of an entity:			
Steve	n C. Lee		ik g
Vice F	(Typed or Printed Nam President	ie)	AHAAA E T
	(Capacity)	`	LED 23 AM 9: AMY OF ST

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

### FILING FEES:

\$ 85.00 Active limited liability company

\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company