

LD30000033879

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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WAIT

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MAIL

(Business Entity Name)

LD3-33879

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED
09 DEC 14 PM 2:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Outgates DEC 14 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 30, 2009

TODD A MORICI
300 COLFAX AVENUE
CLIFTON, NJ 07013

SUBJECT: MICHAEL CONSTRUCTION, LLC
Ref. Number: L03000033879

We have received your document for MICHAEL CONSTRUCTION, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 009A00036617

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MICHAEL CONSTRUCTION, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L03000033879

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:

TODD A. MORICI

Name of Person

Name of Firm/Company

300 COLFAX AVENUE

Address

CLIFTON, NJ 07013

City/State and Zip Code

TMORICI@OPTONLINE.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TODD MORICI

Name of Person

at (973) 249 1600

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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,

M. RICHARD SAPIR, ESQ., hereby resigns as
Name of Registered Agent

Registered Agent for MICHAEL CONSTRUCTION, LLC

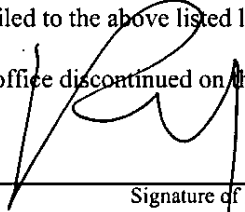
Name of Limited Liability Company

L03000033879

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:

M. RICHARD SAPIR
Typed or Printed Name

Capacity

FILED
09 DEC 14 PM 2:58
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