

LO 360037601

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SEALY STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CUSTOM NATURAL STONE, LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: L03000037601

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:

RISHI KAWALL

(Name of Person)

CUSTOM NATURAL STONE

(Name of Firm/Company)

10862 SW 188TH STREET

(Address)

MIAMI, FL 33157

(City/State and Zip Code)

For further information concerning this matter, please call:

RISHI KAWALL

(Name of Person)

at (305) 234-9464

(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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
409 E. Gaines Street
Tallahassee, FL 32399

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05 DEC 30 PM 12:11
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,

MILTON WILLIAMS

(Name of Registered Agent)

, hereby resigns as

Registered Agent for CUSTOM NATURAL STONE, LLC

10862 SW 188TH STREET MIAMI, FL 33157

(Name of Limited Liability Company)

L03000037601

(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.

Milton Williams

(Signature of Resigning Agent)

If signing on behalf of an entity:

Milton Williams

(Typed or Printed Name)

(Capacity)



Steve Myers, Notary
FILED
05 DEC 30 PM 12:11
STATE OF FLORIDA
TALLAHASSEE

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withdrawn limited liability company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