# 103000051952

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## **COVER LETTER**

SUBJECT:	PORTA TE	RRA E	NTERP	RISES	<u>, LL</u>	C:	·	_	
DACTINADAM ATUS			-	· -		*			
DOCUMENT NUM			_030000			<del></del> -	<del></del>	-	
The enclosed Resign for filing.	nation of Registered	Agent for	a Limited	Liabilit	y Cor	npany	and fee a	are sub	mitted
Please return all corr	espondence concerr	ning this r	natter to th	e follow		·			
CHRI	STOPHER-P: KEL Name of Person	LEY-	<u> </u>		iste in par inte		<del>.</del>	· , ··	
	OPHER P. KELLE ame of Firm/Company				,	•			
11098 BISCA	YNE BOULEVARD Address	<u>), SUITE</u>	205			• •			
	MIAMI, FL 33161 ity/State and Zip Code	•			•				
	be used for future annu	-	-			:			
For further informati	on concerning this r	natter, pie	ease can:			•			
CHRISTOPH Name	IER P. KELLEY of Person	at (_	305 Area Code	& Daytin	893 ne Tel	-6004 ephone	Number	-	
Enclosed is a check read in a				0.0		(	•		

### **MAILING ADDRESS:**

Amendment Section Division of Corporations

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 CHRISTOPHER P. KELLEY, P.A.

TELEPHONE (305) 893-6004 FACSIMILE (305) 893-7666 ATTORNEY AT LAW 11098 BISCAYNE BOULEVARD SUITE 205 MIAMI, FLORIDA 33151

EMAIL ADDRESS
CPKLAW@BELLSOUTH.NET

June 9, 2010

Amendment Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

RE: PORTA TERRA ENTERPRISES, LLC

RESIGNATION OF REGISTERED AGENT

Dear Madam or Sir:

Enclosed please find my check for \$85.00 with Resignation of Registered Agent for the above referenced Limited Liability Company.

Thank you for your cooperation.

Very truly yours,

CHRISTOPHER P. KELLEY

CPK:rd Enclosures

स्थित है। इस सुरक्ष के प्रतिवाद के प्रमाण के प्रतिवाद के स्थान के प्रतिवाद के स्थान के प्रतिवाद के स्थान के स्थान

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# RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

CHRISTOPHER P. KELLEY Name of Registered Agent  Registered Agent for  PORTA TERRA ENTERPRISES, LLC  Name of Limited Liability Company  L03000051952  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 standient is filed.  Signature of Resigning Agent  If signing on behalf of an entity:  Typed or Printed Name  Capacity	Pursuant to the provisions of	f section 608.416(2) or 608.509, Fl	orida Statutes, the	e undersigned	,		
Registered Agent for PORTA TERRA ENTERPRISES, LLC  Name of Limited Liability Company  L03000051952  Document Number, if known  A copy of this resignation was mailed to the above listed limited liability company at its last known at the agency is terminated and the office discontinued on the 31st day after the date on which this staffment is filed.  Signature of Resigning Agent  Typed or Printed Name	CHRIST	TOPHER P. KELLEY	, hereb	ov resigns as	•		
Name of Limited Liability Company  L03000051952  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  Typed or Printed Name	Nar	ne of Registered Agent	,				
L03000051952  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 Rosigning Agent  Typed or Printed Name	Registered Agent for	PORTA TERRA ENTERPRISES, LLC					
L03000051952  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 Rosigning Agent  Typed or Printed Name		. <del>.</del>	-		로 :	<b>.</b>	
A copy of this resignation was mailed to the above listed limited liability company at its last known storess.  The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.  Signature of Rosigning Agent  Typed or Printed Name	i gelik iliye — Hi	Name of Limited Liability Comp	any	1 11 -	ECRE JIN	=	
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  Typed or Printed Name	L0300005	1952		•	AR SS	m	
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filled.  Signature of Resigning Agent  Typed or Printed Name	Document Number	r, if known	;		Fig D		
If signing on behalf of an entity:  Typed or Printed Name	A copy of this resignation w	as mailed to the above listed limite	ed liability compa	ny at its last k	nown audress.	,	
Typed or Printed Name	The agency is terminated an	My 6	Mes	nte on which t	his statement is	iled.	
	If signing on behalf of an en	tity:		•			
Capacity	. —	Typed or Printed Nam	e				
	•	Capacity					

\$ 85.00 \$ 25.00

Active limited liability company
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