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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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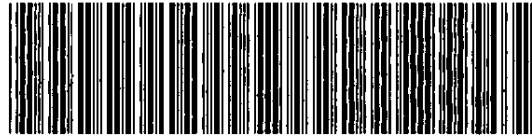
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

D. BRUCE

JAN - 4 2010

EXAMINER

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Apex Construction Development LLC  
Name of Limited Liability Company

DOCUMENT NUMBER: \_\_\_\_\_

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:

Marc S. Steinhorn  
Name of Person

Apex Construction Development Inc.  
Name of Firm/Company

3598 Westover Rd.  
Address

Orange Park FL 32003  
City/State and Zip Code

steinhorn1@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marc Steinhorn at ( 904 ) 237-6122  
Name of Person 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\$85.00 for an active limited liability company of \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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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,

GORDON D. JESPERSON, hereby resigns as  
Name of Registered Agent

Registered Agent for Apex Construction Development LLC.  
Name of Limited Liability Company

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]  
Signature of Resigning Agent

If signing on behalf of an entity:

Marc S. Steinhour  
Typed or Printed Name  
Managing Member / Owner  
Capacity

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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