## L04000083223

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filina Officer:	
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SECRETARY DE STATE

RA Res.



November 30, 2006

William S. Scott, Esq. 940 NE 79th Street, Suite A Miami, FL 33138

SUBJECT: AFTERMATH CONSTRUCTION, LLC

Ref. Number: L04000083223

We have received your document for AFTERMATH CONSTRUCTION, LLC and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The wrong form was submitted to resign as the agent of a limited liability company. Enclosed is the correct form.

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) 245-6901.

Letter Number: 206A00068980

Susan Payne Senior Section Administrator

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Aftermath (ONstruction, LLC (Name of Corporation)
DOCUMENT NUMBER: <u>L04000083223</u>
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
William S. Scott Esq. (Name of Person)
(Name of Firm/Company)
940 NE 79th Street Suite A (Address)
Miami FL 33138  J(City/State and Zip Code)
For further information concerning this matter, please call:
William S. Soft at (305) 754-3603 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

revisions of section 609 416(2) on 609 500 Florido Statutos the undersigned

Pursuant to the provisions of section 608.416(2) or 608.509, Flor	nda Statutes, the undersigned,
William S. Scott	, hereby resigns as
(Name of Registered Agent)	
Registered Agent for Aftermath Coast	iruction LLC
(Name of Limited Liability Compan	<u>''</u> ,
L040000 \$3223 (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 Age	1/26/06
If signing on behalf of an entity:  (Typed or Printed Name)	TALELAR OT JAN
FILING FEES: \$ 85.00 Active limited lia \$ 25.00 Administratively withdrawn limite	31 PM 5: F

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