

L05000007376

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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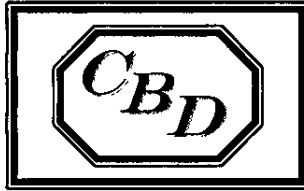


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07 OCT -1 PM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CONERLY, BOWMAN & DYKES, P.A.

ATTORNEYS & COUNSELORS AT LAW

LAMAR A. CONERLY *
J. BRUCE BOWMAN**◆
HAYWARD DYKES, JR.
LEVIN F. BRACKEN***

*Also Admitted in MS
**Also Admitted in TX
***Also Admitted in TN
◆Board Certified Civil
Trial Lawyer

September 27, 2007

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

RE: Registered Agent Resignation for: Lot 27 Betty Street, LLC
Adagio B204, LLC, Adagio F205, LLC, 19 Buddy Street, LLC

Dear Sir/Madam:

Enclosed herewith please find the Resignations of Registered Agent for the above-entitled companies along with a check in the amount of \$340.00. Once same has been filed, please send a confirmation to our office at the above address.

Thank you for your prompt attention to this matter.

Very truly yours,

Tara L. Burkett
Paralegal to Lamar A. Conerly, Jr.

LCJ/tlb
Enclosures: as stated

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lot 27 Betty Street, LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: L05000007376

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:

Lamar A. Conerly
(Name of Person)

(Name of Firm/Company)

Post Office Box 6944
(Address)

Destin, Florida 32550
(City/State and Zip Code)

For further information concerning this matter, please call:

Tara L. Burkett at (850) 837-5118
(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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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,

Law Offices of Lamar A. Conerly, P.A., hereby resigns as
(Name of Registered Agent)

Registered Agent for Lot 27 Betty Street, LLC

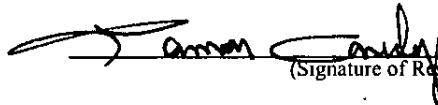
(Name of Limited Liability Company)

L05000007376

(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:

Lamar A. Conerly

(Typed or Printed Name)

Registered agent

(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