# L05000050994

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PICK-UP W	AIT MAIL	
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### **COVER LETTER**

Division of Corporations  The Amendment Section  Division of Corporations
SUBJECT: 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:
John M Valcarce
Mistacle Construction LLC JJ Statenhouses
2708 Miracle Pkwy. Address
CAPE CORAL, FL 37914  City/State and Zip Code
Poncho 955 @ AOL  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lisa Valcarce at 347 489 - 2371  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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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



Division of Corporations

April 11, 2012

JOHN VALCARCEL 2708 MIRACLE PARKWAY CAPE CORAL, FL 33914

SUBJECT: MIRACLE CONSTRUCTION LLC

Ref. Number: L12000046517

We have received your document for MIRACLE CONSTRUCTION LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

No form was enclosed just the cover letter.

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) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 012A00011549

should have been form SS Staten homes the Resignation LOS-50994

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED **LIABILITY COMPANY**

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Sta	atutes, the undersigned,
John M Valcancel Name of Registered Agent	, hereby resigns as
Registered Agent for JJ Staten Homes	440
Name of Limited Liability Company	·
L050000,50994	
Document Number, if known	
A copy of this resignation was mailed to the above listed limited liabilit	ty company at its last known address.
The agency is terminated and the office discontinued on the 31st day af	ter the date on which this statement is filed.
John Valcand Signature of Resigning Agen	SEC 72
If signing on behalf of an entity:	APR 20 LAHAS
Typed or Printed Name	
Capacity	STATE ORD

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company \$ 85.00 \$ 25.00

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