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10/01/08--01012--007 **25.00

10/28/08--01005--009 **60.00







TO: Amendment Section Division of Corporations

SUBJECT: Ma & Pa's Enterprises/LLC (Name of Limited Liability Company) DOCUMENT NUMBER: L05000057476 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: Dorothy J Benson (Name of Person) Ma & Pa's Enterprises/LLC (Name of Firm/Company) 3241 NE Hwy 349 (Address) Old Town, FL 32680 (City/State and Zip Code) For further information concerning this matter, please call: 352-542-2741 352 542-9208 OR 35 (Area Code & Daytime Telephone Number) Dorothy J Benson (Name of Person) 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn

MAILING ADDRESS:

limited liability company.

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 13, 2008

DOROTHY J. BENSON MA & PA'S ENTERPRISES, LLC 3241 NE HWY 349 OLD TOWN, FL 32680

SUBJECT: MA & PA'S ENTERPRISES/LLC

Ref. Number: L05000057476

We have received your document for MA & PA'S ENTERPRISES/LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

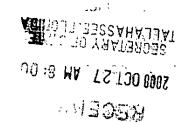
The fee to resign as registered agent of an active limited liability company is \$85.00.

There is a balance due of \$60.00.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist Supervisor

Letter Number: 808A00053566



RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 60	08.416(2) or 608.509, Florida Statutes, the unde	rsigned,
Victor ₹ Benson Sr	, hereby resi	ยทร ลร
(Name of Registe	cred Agent)	B.10. 40
Registered Agent for Ma & Pa's	Enterprises/LLC	
(Nam	e of Limited Liability Company)	,
L05000057476	•	
(Document Number, if known)		
A copy of this resignation was mailed to	o the above listed limited liability company at i	ts last known address.
The agency is terminated and the office	discontinued on the 31st day after the date on	which this statement is filed.
Want 1	Be	
	(Signature of Resigning Agent)	
If signing on behalf of an entity:		001
	VICTOR P BENSON SR	28
	(Typed or Printed Name)	
	(Capacity)	

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