

L05000109505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

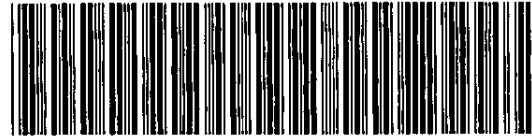
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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13 NOV 14 PM 12:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOV 18 2013

T. BROWN

## **BDB AGENT CO.**

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3800 Embassy Parkway Suite 300 Akron, Ohio 44333  
330.376.5300 Toll Free 800.686.2825 Fax 330.258.6559 www.bdblawn.com

Ruth A. Martell  
Direct Phone: (330) 643-0204  
Direct Fax: (330) 252-5204  
E-Mail: [rmartell@bdblawn.com](mailto:rmartell@bdblawn.com)

November 8, 2013

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Re: Registered Agent Resignation – Jewelry Showcase, LLC**

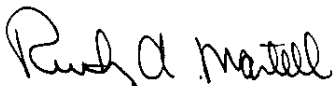
Gentlemen:

Please process the attached cover letter and agent resignation form for Jewelry Showcase, LLC, an inactive limited liability company. A check in the amount of \$25.00 is attached to cover the filing fee for this entity.

If you have any questions, please feel free to contact me. Thank you.

Sincerely,

**BDB AGENT CO.**



Ruth A. Martell  
Assistant Secretary

Enclosure

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Jewelry Showcase, LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L05000109505

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:

Ruth Martell

Name of Person

BDB Agent Co.

Name of Firm/Company

3800 Embassy Parkway, Suite 300

Address

Akron, OH 44333

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ruth Martell

Name of Person

at ( 330 ) 643-0204

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,

**BDB Agent Co.**

\_\_\_\_\_  
Name of Registered Agent

Registered Agent for **Jewelry Showcase, LLC**

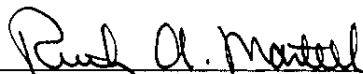
\_\_\_\_\_  
Name of Limited Liability Company

**L05000109505**

\_\_\_\_\_  
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:

**Ruth A. Martell**

\_\_\_\_\_  
Typed or Printed Name

**Assistant Secretary**

\_\_\_\_\_  
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**

**FILED**  
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**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**