

L06000006448

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

L06-6448

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. O'Leary FEB - 9 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VANTAGE CIRCA 39, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L06000006448

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:

NEALE J. POLLER, ESQ.

Name of Person

GARBETT, STIPHANY, ALLEN & ROZA, P.A.

Name of Firm/Company

80 SW 8TH STREET, SUITE 3100

Address

MIAMI, FL 33130

City/State and Zip Code

NPOLLER@LBGSLAW.COM

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

For further information concerning this matter, please call:

Name of Person

at (_____)

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2010

NEALE J. POLLER, ESQ.
GARBETT, STIPHANY, ALLEN & ROZA, P.A.
80 SW 8TH STREET, SUITE 3100
MIAMI, FL 33130

SUBJECT: VANTAGE CIRCA 39, LLC
Ref. Number: L06000006448

We have received your document for VANTAGE CIRCA 39, 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 Resigning Agent must sign.

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) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 810A00002407

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,

NEALE J. POLLER, ESQ, hereby resigns as

Name of Registered Agent

Registered Agent for VANTAGE CIRCA 39, LLC


Name of Limited Liability Company

L06000006448

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:

VANTAGE CIRCA 39, LLC

Typed or Printed Name

Capacity

FILED
10 FEB - 8 AM 8:43
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