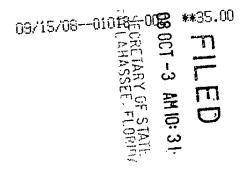
L06000024493

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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<u>.</u>							





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COVER LETTER

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SUBJECT: DONUT TRAIN OF KEY WEST, LLC (Name of Limited Liability Company)
DOCUMENT NUMBER: LOGOCO24493
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:
MARY BETH MEYERS (Name of Person) WARD & MEYERS, LLC (Name of Firm/Company)
3201 Flagler AVE, SUITE SOLO
Key West, FL 33040 (City/State and Zip Code)
For further information concerning this matter, please call:
MARY BEDY MEYERS at (305) 293-0265 EXT. 02 (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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

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

September 17, 2008

MARY BETH MEYERS 3201 FLAGLER AVE., SUITE 506 KEY WEST, FL 33040

SUBJECT: DONUT TRAIN OF KEY WEST, LLC

Ref. Number: L06000024493

OB OCT -3 AM IO:

We have received your document for DONUT TRAIN OF KEY WEST, LL@ and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

To resign as registered agent for an active limited liability company, the enclosed resignation form should be completed and returned with a filing fee of \$85.00.

A balance of \$50.00 is due.

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) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 508A00050495

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisior	is of section 608.	416(2) or 608.5	09, Florid	a Statutes, t	he undersigned	i,		
MAR	Name of Registere	MEYERS	<u> </u>	, her	eby resigns as			
	(Name of Registere	d Agent)						
Registered Agent for	DONUT	TEAIN	OF	KEY	WEST	LIC	98	
	•				'			-
	(Name	of Limited Liability	(Company)			# <u>#</u>	~ <u>^</u> ~	1227 Marie
1 060000	24493					SSEE	ယ်	
(Document Number						F	A	[]
A comu of this resignation	m vyos medled to	tha abassa lista d	Danisa d Da	. l. : 1 : a	4 24- 14 1	10,7 10,7 10,7	(r)	
A copy of this resignatio	n was maneu to	the above fisted	iimiied iiz	ibility comp	bany at its last i	knownader	ess <u></u>	
The agency is terminated	l and the office d	iscontinued on t	he 31st da	y after the	date on which		nt is fi	led.
	. .							
u	Mary L	Sett 1 (Signature of	Dey	en .				
		(Signature of	esigners.	Agent)				
If signing on behalf of ar	entity:							
		(Typed or Printe	ed Name)					
		(Capacity)	·····					

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