Division of Corporations Electronic Filing Cover Sheet

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(((H10000211683 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name Account Number: I20050000052

: INCORPORATING SERVICES FL

Phone

: (302)531-0855

Fax Number

: (850) 656-7953

**Enter the email address for this business entity to be used for further annual report mailings. Enter only one email address please.

A. LUNT

OCT -1 2010

LLC REGISTERED AGENT RESIGNATION EMERALD CAPITAL GROUP, LLC

Certificate of Status	0
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COVER LETTER

TO: Amendment Section Division of Corporations				
Division of Corporations				
SUBJECT: EMERALD CAPITAL GROUP, LLC				
(Name of Limited Liab	bility Company)			
DOCUMENT NUMBER: L06000029686		•		
The enclosed Resignation of Registered Agent for a Lir for filing.	nited Liability Company and fee ar	re subn	nitted	
Please return all correspondence concerning this matter	to the following:			
EDIE WHITEBREAD		EX.	2010	
(Name of Person)	 -	> #	33	
INCORPORATING SERVICES, LTD.		ASS.	2010 SEP 30	
(Name of Firm/Company)	į	Tiggi	A	
3500 S. DUPONT HWY	·		X	O
(Address)		7	<u> </u>	
DOVER, DE 19901	·	•		
(City/State and Zip Code)				
For further information concerning this matter, please c	all:			
EDIE WHITEBREAD at (302 (Area) 531.0855 Code & Daytime Telephone Number))		
Enclosed is a check made payable to the Florida Depart liability company or \$25.00 for an administratively diss limited liability company.	ment of State for \$85.00 for an act- solved, voluntarily dissolved or wit	ive lim hdraw	nited n	

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

(((H10000116833)))

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Pioric	a Statutes, the undersigned,		
INCORPORATING SERVICES, LTD.	, hereby resigns as	##	2010 SEP
(Name of Registered Agent)	,,	AS	
Registered Agent for EMERALD CAPITAL GROUP, LLC		<u> </u>	_ [3
		NY SEL	-30 F
(Name of Limited Liability Company	·)	700	
L06000029686		ORID	G/I
(Document Number, if known)		7	
A copy of this resignation was mailed to the above listed limited li			
The agency is terminated and the office discontinued on the 31st d	Tone	i statement	is filed.
If signing on behalf of an entity:	·		
CANDICE B. SWETLAND			
(Typed or Printed Name)	 		
ASSISTANT SECRETARY			
(Copacity)	• • •		

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

(((H10000211683 3)))

INHS17 (08/05)