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TALLAHASSEE, FLORIDA

B. BOSTICK
AUG - 7 2013
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Hillsboro Auto Repair, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L06000064364

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:

Herschel Gavsie, Esq

Name of Person

Greenspoon Marder, P.A.

Name of Firm/Company

100 West Cypress Creek Road, Suite 700

Address

Ft. Lauderdale, FL 33309

City/State and Zip Code

herchel.gavsie@gmlaw.com

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

For further information concerning this matter, please call:

Herschel Gavsie

Name of Person

at (954) 491-1120

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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,

Herschel Gavsie, Esq.

_____, hereby resigns as
Name of Registered Agent

Registered Agent for **Hillsboro Auto Repair, LLC**

Name of Limited Liability Company

L06000064364

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:

Greenspoon Marder, P.A.

Typed or Printed Name

Attorney of the Firm

Capacity

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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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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