L06000075099

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)
PICK-UP WAIT MAIL (Business Entity Name) (Document Number)
PICK-UP WAIT MAIL (Business Entity Name) (Document Number)
(Business Entity Name) (Document Number)
(Business Entity Name) (Document Number)
(Document Number)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Oertified doples Oertificates of Otatus
Special Instructions to Filing Officer:
·
•





000144818650

03/04/09--01006--013 **85.00

PILED

09 MAR -4 PM 2: 16

SECKETARY OF STATE
TALLAHASSEE, FLORIDA

Des Miles

COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: 2945 POPLAR DEVELOPMENT, LLC

(Name of Limited Liability Company)

DOCUMENT NUMBER: L06000075099

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:

MICHAEL I. BERNSTEIN

(Name of Person)

MICHAEL I. BERNSTEIN, P.A.

(Name of Firm/Company)

1688 MERIDIAN AVENUE, SUITE 418

(Address)

MIAMI BEACH, FL 33139

(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL I. BERNSTEIN

(Name of Person)

at (305) 672-9544 (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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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,

	eby resigns as	
(Name of Registered Agent)	eby resigns as SECRET	
Registered Agent for 2945 POPLAR DEVELOPMENT,LLC	X X X	
	SSER LE	
(Name of Limited Liability Company)	TS → D	
L06000075099	Z: 16 TATE ORID	
(Document Number, if known)	B	
A copy of this resignation was mailed to the above listed limited liability compa	any at its last known address.	
The agency is terminated and the office discontinued on the 31st day after the d (Signature of Resigning Agent)	date on which this statement is file	d.
If signing on behalf of an entity:		
MICHAEL I. BERNSTEIN		
(Typed or Printed Name)		
(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