

L07000021769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

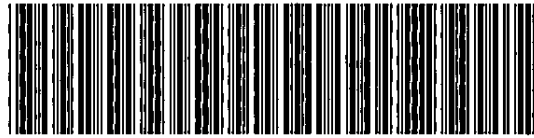
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/05/07--01021--009 **87.50

RA Resign

FILED
07 OCT 22 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts OCT 22 2007



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 11, 2007

GIANCARLO BOUCUGNANI
NATIONAL REGISTERED AGENTS, INC.
501 BRICKELL KEY DR STE 602
MIAMI, FL 33131

SUBJECT: RED KEY ENTERPRISE, LLC
Ref. Number: L07000021769

We have received your document for RED KEY ENTERPRISE, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears that you completed the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 007A00059853

RECEIVED
2007 OCT 22 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

National Registered Agents, Inc.

501 Brickell Key Drive

Suite 602

Miami, FL 33131

Tel: (305) 375-8484; Fax: (305) 374-2919

October 16, 2007

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fla 32314

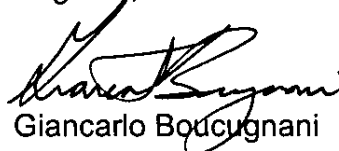
Re: Red Key Enterprise, LLC – Ref. Number: L07000021769

To Whom It May Concern:

Thank you for your October 11, 2007 letter (enclosed). Enclosed please find the requested executed Resignation of Registered Agent for Limited Liability Company form. The filing fee was previously submitted to your office with our initial filing.

If you have any questions, please do not hesitate to contact me at (305) 375-8484.

Regards,


Giancarlo Boucugnani

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RED KEY ENTERPRISE, LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: L07000021769

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:

GIANCARLO BOUCUGNANI

(Name of Person)

NATIONAL REGISTERED AGENTS, INC.

(Name of Firm/Company)

501 BRICKELL KEY DRIVE, SUITE 602

(Address)

MIAMI, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

GIANCARLO BOUCUGNANI at (305) 375-8484

(Name of Person)

(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,

NATIONAL REGISTERED AGENTS, INC.

(Name of Registered Agent)

Registered Agent for RED KEY ENTERPRISE, LLC

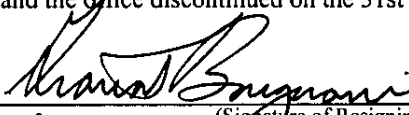
(Name of Limited Liability Company)

L07000021769

(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)
as Representative of National Registered Agents, Inc.

If signing on behalf of an entity:

NATIONAL REGISTERED AGENTS, INC.

(Typed or Printed Name)

VICE PRESIDENT

(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

FILED
07 OCT 22 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA