

LO7000039323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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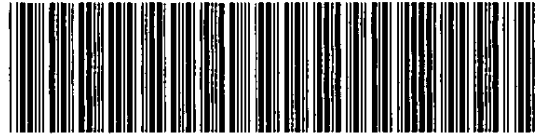
(Business Entity Name)

(Document Number)

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2009 JUL 30 PM 2:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

JUL 31 2009

EXAMINER

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ST Land LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L07000039323

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:

JESUS MEJIA

Name of Person

ST LAND LLC

Name of Firm/Company

125 ROCKINGHAM RD

Address

JUPITER FL 33458

City/State and Zip Code

BRETTBURGIN@GMAIL.COM

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

For further information concerning this matter, please call:

BRETT BURGIN

Name of Person

at ( 561 ) 282-6691

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

JESUS MEJIA, hereby resigns as  
Name of Registered Agent

Registered Agent for ST LAND LLC  
Name of Limited Liability Company

L07000039323  
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.

If signing on behalf of an entity:

[Signature]  
Signature of Resigning Agent  
JESUS MEJIA  
Typed or Printed Name  
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