

LO7000095474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

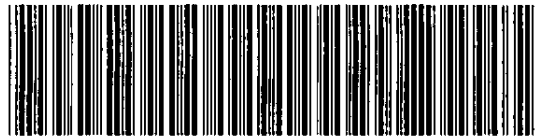
(Business Entity Name)

(Document Number)

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*RA Kegan*

FILED  
10 JAN 25 AM 8:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Roberts JAN 26 2010



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 14, 2010

SUSAN COLEMAN  
FOLEY & LARDNER LLP  
ONE INDEPENDENT DR, STE 1300  
JACKSONVILLE, FL 32202

SUBJECT: VINTAGE ULTRA LOUNGE, LLC  
Ref. Number: L07000095474

We have received your document for VINTAGE ULTRA LOUNGE, 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: 710A00001094

RECEIVED  
2010 JAN 25 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*See attached forms 1-21-10*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Vintage Ultra Lounge, LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L07000095474

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:

Susan Coleman, Paralegal  
Name of Person

Foley & Lardner LLP  
Name of Firm/Company

One Independent Drive, Suite 1300  
Address

Jacksonville, FL 32202  
City/State and Zip Code

scoleman@foley.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susan Coleman at ( 904 ) 359-8744  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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,

F&L Corp, hereby resigns as  
Name of Registered Agent

Registered Agent for Vintage Ultra Lounge, LLC

Name of Limited Liability Company

L07000095474  
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.

Charles V. Hedrick  
Signature of Resigning Agent

If signing on behalf of an entity:

Charles V. Hedrick  
Typed or Printed Name  
Authorized Signatory - F&L Corp  
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**  
10 JAN 25 AM 8:20  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA