

L07000095936

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

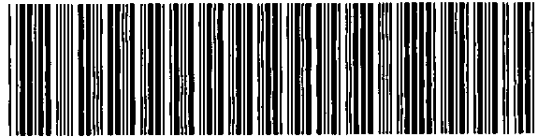
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 FEB 17 PM 3:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 18 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Adepto Capital LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L07000095936

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:

Samantha Sobarzo

Name of Person

A and A Companies, Inc.

Name of Firm/Company

523 West 6th Street, Ste. 1223

Address

Los Angeles, CA 90014

City/State and Zip Code

service@aandacompanies.com

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

For further information concerning this matter, please call:

Samantha Sobarzo

at (888) 651-1006

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company. *As advised, I've also added a \$2.50 payment for return of me (1) conformed copy of this filing for our records. Thank you.*

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

A and A Companies, Inc.

, hereby resigns as

Name of Registered Agent

Registered Agent for Adepto Capital LLC

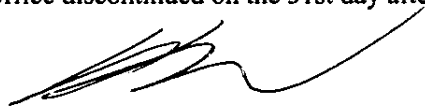
Name of Limited Liability Company

L07000095936

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:

Kevin J. Keenan

Typed or Printed Name

President of A and A Companies, Inc.

Capacity

FILED
16 FEB 17 PM 3:32
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