

LOT 000099299

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

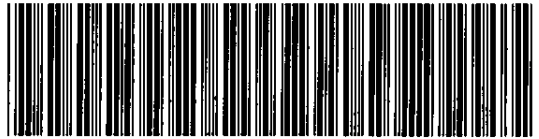
(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

RA Resign
Theris
12/18/07

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sam develop LLC
(Name of Corporation)

DOCUMENT NUMBER: L09000099299

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DEBORAH SAMUEL
(Name of Contact Person)

(Firm/Company)

3110 NE 2ND Ave
(Address)

MIAMI FL 33137
(City/State and Zip Code)

For further information concerning this matter, please call:

PAUL ADAMS at (305) 757-0001
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

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,

MICHAEL SAMUEL, hereby resigns as
(Name of Registered Agent)

Registered Agent for SAM DEVELOP LLC

(Name of Limited Liability Company)

LO7000099299
(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]
(Signature of Resigning Agent)

If signing on behalf of an entity:

SAM DEVELOP LLC
(Typed or Printed Name)

MANAGING MEMBER
(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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

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