

L07000100057

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

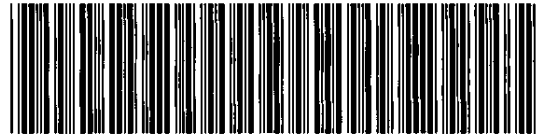
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 17, 2008

JOHN MEJIA
S & S CAPRI LLC
1200 W. DAUGHTERY RD.
LAKELAND, FL 33810

SUBJECT: S & S CAPRI LLC.
Ref. Number: L07000100057

We have received your document for S & S CAPRI LLC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$85.00.

The fee to resign as registered agent of an active limited liability company is \$85.00.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 408A00041899

RECEIVED
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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: S & S CAPRI LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: L07000100057

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:

JOHN MEJIA

(Name of Person)

S & S CAPRI LLC

(Name of Firm/Company)

1200 W DAUGHTERY RD

(Address)

LAKELAND, FL 33810

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN MEJIA

(Name of Person)

at (551) 4820033

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

JOHN MEJIA

(Name of Registered Agent)

, hereby resigns as

Registered Agent for **S & S CAPRI LLC**

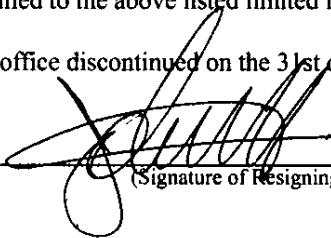
(Name of Limited Liability Company)

L07000100057

(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:

JOHN MEJIA

(Typed or Printed Name)

REGISTERED AGENT

(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