

L080000056348

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TALLAHASSEE, FLORIDA

N. Culligan SEP 30 2011

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PRUTLER GROUP, LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** LO8000056348

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:

HILLEL PRESSER

Name of Person

THE PRESSER LAW FIRM, P.A.

Name of Firm/Company

800 FAIRWAY DRIVE, STE 340

Address

DEERFIELD BEACH, FL 33441

City/State and Zip Code

INFO@ASSETPROTECTIONATTORNEYS.COM

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

For further information concerning this matter, please call:

HILLEL PRESSER

Name of Person

at ( 561 ) 953-1050

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

HILLEL L. PRESSER & ASSOCIATES, PA, hereby resigns as  
Name of Registered Agent

Registered Agent for PRUTLER GROUP, LLC

Name of Limited Liability Company

L08000056348

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:

Hillel Presser  
Typed or Printed Name

President  
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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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