

L080000 76927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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(Business Entity Name)

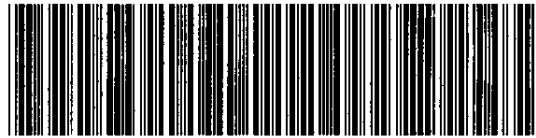
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TALLAHASSEE, FLORIDA

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Presidential Circle
4000 Hollywood Blvd.
Suite 675-South
Hollywood, FL 33021
Tel: 954.989.6333
Fax: 954.989.7781
www.zpllp.com

November 12, 2009

Via U.S. Certified Mail

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

Re: Document Numbers: L08000076927; L07000084587; L09000012384;
M06000003474; L08000049671; L08000058671; L08000061798;
L08000100018; L09000007299

Dear Sir or Madam:

With respect to the above referenced entities, enclosed please find check #9394 in the amount of \$465.00 representing the filing fees for the following resignations:

1. ESID, LLC/L08000076927 – Resignation as Registered Agent (Filing fee in the amount of \$85.00 is enclosed);
2. Bova Prime, LLC/L07000084587 – Resignation as Vice President (Filing fee in the amount of \$25.00 is enclosed);
3. Madison Avenue Partners, LLC/L09000012384 – Resignation as Co-Manager (Filing fee in the amount of \$25.00 is enclosed);
4. Casa Casuarina, LLC/M06000003474 – Resignation as Executive Vice President (Filing fee in the amount of \$25.00 is enclosed);
5. C.S. USA, LLC/L08000049671 – Resignation as Registered Agent (Filing fee in the amount of \$25.00 is enclosed);
6. Cart Shield USA, LLC/L08000058671 – Resignation as Registered Agent (Filing fee in the amount of \$85.00 is enclosed);
7. Horseshoe Cigarettes, LLC/L08000061798 – Resignation as Registered Agent (Filing fee in the amount of \$85.00 is enclosed);



8. WAWW21, LLC/L08000100018 – Resignation as Registered Agent (Filing fee in the amount of \$25.00 is enclosed); and
9. Luxury Power Cats, LLC/L09000007299 – Resignation as Registered Agent (Filing fee in the amount of \$85.00 is enclosed).

Should you have any questions about the above named filings, please do not hesitate to call me at 954-989-6333 ext. 224.

Thank you.

Very truly yours,

A handwritten signature in black ink, appearing to read 'Simona Bulicich', with a large, stylized flourish at the end.

Simona Bulicich
Paralegal to Todd S. Payne, Esq.

/sb
Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ESID, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L08000076927

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:

TODD S. PAYNE, ESQ.
Name of Person

ZEBERSKY & PAYNE, LLP
Name of Firm/Company

4000 HOLLYWOOD BLVD., SUITE 675-S
Address

HOLLYWOOD, FL 33021
City/State and Zip Code

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

For further information concerning this matter, please call:

TODD S. PAYNE, ESQ. at (954) 989-6333
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.

David J. Boden

Name of Registered Agent

. hereby resigns as

Registered Agent for ESID, LLC

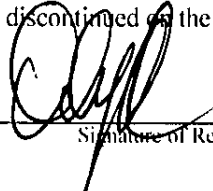
Name of Limited Liability Company

L08000076927

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:

David J. Boden

Typed or Printed Name

Capacity

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TALLAHASSEE, FLORIDA
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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