

L080006100077

(Requestor's Name)

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(Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

F. HAMPTON
OCT 10 2011
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FLVA Adventures
Name of Limited Liability Company

DOCUMENT NUMBER: LO8000100077

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:

Josh Williams
Name of Person

FLVA Adventures
Name of Firm/Company

158 Avalon Dr
Address

Ormond Bch FL 32176
City/State and Zip Code

Josh@BranddSolutions.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Josh Williams at (386) 983-5377
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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,

Margo L Taylor Forman margo madden, hereby resigns as
Name of Registered Agent

Registered Agent for FLVA Adventures, LLC

Name of Limited Liability Company

L08000100077
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.

M. Taylor
Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

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withdrawn limited liability company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

INHS17 (08/05)

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