# Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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(((H150001885573)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: INCORP SERVICES INC Account Name

Account Number : I20120000007 : (702)866-2500 Fax Number : (702)866-2689

Her the email address for this business entity to be used for future

sannual report mailings. Enter only one email address please.\*\*

## LLC REGISTERED AGENT RESIGNATION SEASIDE INTERNET-PUTNAM, LLC

Certificate of Status	0
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8/4/2015

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## **COVER LETTER**

H150001885573

TO: Registration Section Division of Corporations

SUBJECT:	SEASIDE INTERNET-PUTNAM, LLC				
_	TO AVELED TO DO	Name of Lin L090000048	mited Liability 06	Company	<del></del>
DOCUMEN	T NUMBER:			<u> </u>	
The enclosed for filing.	Resignation of R	egistered Agent	for a Limited	Liability Company and fe	e are submitted
Please return	all correspondence	e concerning th	is matter to th	ne following:	
Janice Null					
·	Name of	Person		•	
InCorp Ser	vices, Inc.				
	Name of Firm	п/Сотралу		•	
2360 Corpo	orate Circle, Suit	te 400			
	Addr	ess			
Henderson	, NV 89074				
	City/State an	d Zip Code		•	
processing	@incorp.com				
E-mail add	iress: (to be used for	future annual repor	t notification)	•	
For further in	formation concern	ning this matter,	please call:		
Janice Null 1	for InCorp Servi	ces, Inc.	702 t (	866-2500	
	Name of Person		Area Code	Daytime Telephone Number	er

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## STREET ADDRESS:

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

INHS17 (2/14)

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# STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.011	5, Florida Statutes, the unde	asigned,		
InCorp Services, Inc.			, hereby resigns as		
	Name of Registered Age	nt	,,		
Registered Agent for _	SEASIDE INTE	RNET-PUTNAM, LLC			
	Name of Lin	nited Liability Company		<u></u>	
L09000004806		•			
Document N	lumber, if known	<del></del>	,		
A copy of this resignati	ion was mailed to the	above listed limited liability	company at its last kno	wn address.	
The agency is terminate	ed and the office disco	ontinued on the 31st day after	r the date on which this	statement is t	filed.
(	Jani	Signature of Resigning Agent			
If signing on behalf of	an entity:		7	₹.o -±	
.•	Janice Null for I	nCorp Services, Inc.	r r	SEC A	-17
		Typed or Printed Name		ALC: NET	6/8/8/27
	Authorized Rep	resentative	·	ASS	ii ii
		Capacity	<del></del>	元年 王	
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability of Administratively dissolv withdrawn limited liabil	ompany ved/ voluntarily dissolve lity company	7:31 FLORID	J

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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