

L09000056327

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

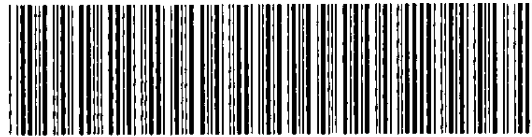
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

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B. KOHR

OCT - 8 2010

EXAMINER

RUTLEDGE, ECENIA, & PURNELL
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

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MARTIN P. MCDONNELL
J. STEPHEN MENTON

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GARY R. RUTLEDGE
MAGGIE M. SCHULTZ

GOVERNMENTAL
CONSULTANTS
JONATHAN M. COSTELLO
MARGARET A. MENDUNI

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT -8 PM 2:45

VIA HAND DELIVERY

MEMORANDUM

TO: Florida Department of State
Division of Corporations
Amendment Section
Attention: Buck Kohr
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

FROM: Teri Choulat
for Maggie M. Schultz

DATE: October 8, 2010

RE: Resignation of Registered Agent

Attached for filing is a Resignation of Registered Agent form for Old Luis Agave, LLC, along with a check in the amount of \$25.00 for the filing fee.

Thank you for your assistance. Please contact us if there is a document to pick up confirming this resignation or if you have any questions.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Old Luis Agave, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L09000056327

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:

Maggie M. Schultz
Name of Person

Rutledge, Ecenia & Purnell, P.A.
Name of Firm/Company

119 S. Monroe St., Suite 202
Address

Tallahassee, FL 32301
City/State and Zip Code

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

For further information concerning this matter, please call:

Maggie Schultz at (850) 681-6788
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

10 OCT - 8 AM 2015
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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,

Maggie M. Schultz

Name of Registered Agent

, hereby resigns as

Registered Agent for Old Luis Agave, LLC

Name of Limited Liability Company

L09000056327

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.

Maggie M. Schultz

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

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