

L09000063910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

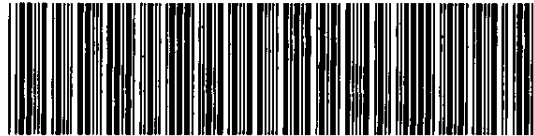
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2010 MAR 22 A 11:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA Resign  
Thurs  
3-25-10

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Beach House Market LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L09000063910

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:

Tina Patterson  
Name of Person

The Beach House Market LLC  
Name of Firm/Company

4952 W. Hwy 98  
Address

Panama City, FL 32401  
City/State and Zip Code

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

For further information concerning this matter, please call:

Sue Duncan at ( 205 ) 987-0633  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Terry M. Habshey

Name of Registered Agent

, hereby resigns as

Registered Agent for The Beach House Market LLC

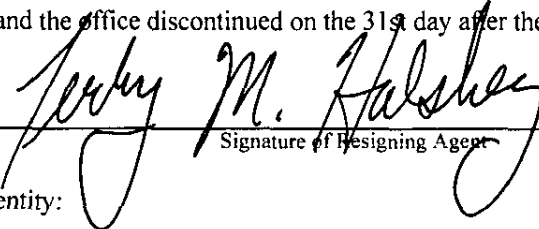
Name of Limited Liability Company

L09000063910

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 31<sup>st</sup> day after the date on which this statement is filed.

  
Signature of Resigning Agent

If signing on behalf of an entity:

Terry M. Habshey

Typed or Printed Name

Manager

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**

**FILED**  
2000 MAR 22 A 11:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA