L09000107769

(Re	questor's Name)			
(Ad	dress)	<u>-</u>		
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(City/State/Zip/Phone #)				
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COVER LETTER

Amendment Section Division of Corporations ·TO:

SUBJECT:	MAC 1613, L	LC	
	Name of Limited Liabi	lity Company	
DOCUMENT NUMBER:	L090001	07769	
The enclosed Resignation of Reg for filing.	gistered Agent for a Limi	ted Liability Company and fee are submitted	
Please return all correspondence	concerning this matter to	the following:	
Jess W. Levins, E	squire		
Name of Po	erson		
Levins & Associat	tes LLC	SECRET TALLAHU	1
Name of Firm/	Company		
6843 Porto Fino C	Circle	SSE TO I	Π
Addres	S	- English	フ
Fort Myers, Florid	a 33912	STATE LORIE	
City/State and	Zip Code		
sheltrimner@hotn	nail.com		

For further information concerning this matter, please call:

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

Jess W. Levins, Esquire at (239) 437-1197

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 2, 2013

JESS W. LEVINS, ESQUIRE LEVINS & ASSOCIATES LLC 6843 PORTO FINO CIRCLE FORT MYERS, FL 33912

SUBJECT: MAC1613, LLC Ref. Number: L09000107769



We have received your document for MAC1613, LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The resigning agent must sign document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 613A00016362

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

j.

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,			(
Jess W. Levins, Esquire , hereby resigns as			
Name of Registered Agent			
Registered Agent for MAC 1613, LLC			
Name of Limited Liability Company			
L09000107769			•
Document Number, if known			
A copy of this resignation was mailed to the above listed limited liability company at its last kno	wn addi	ress.	
The agency is terminated and the office discontinued on the 31st day after the date on which this	ctateme	ent ic fil	eđ.
no agoney is terminated and the office discontinued on the 51st day after the date on which this	Stateme	111 SI 111	eu.
less W. Lennis			
Signature of Resigning Agent			
signing on behalf of an entity:			
N/A	JAI 3S	35	
Typed or Printed Name	S S		77
N/A	¥E		
Capacity	SSE YXY	16	
	Ĺ,o	7	Ш
	FLC	ယ	O
	F STATE FLORID	PH 3: 55	
FILING FEES: \$ 85.00 Active limited liability company	> FH	(C)	
\$ 25.00 Administratively dissolved/voluntarily dissolved	1 /		
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