

(Requestor's Name)	_				
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PICK-UP WAIT MAIL					
(Business Entity Name)	_				
(Document Number)					
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TALLANASSEC, FLORIDA





FLORIDA DEPARTMENT OF STATE **Division of Corporations**

October 5, 2016

IRENE REIMANIS-AZIZ RUSTY PONY RANCH 3620 OAKVIEW COURT DELRAY BEACH, FL 33445

SUBJECT: RUSTY PONY RANCH, LLC

Ref. Number: L09000111874

We have received your document for RUSTY PONY RANCH, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 416A00021432

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	me of the limited liability company:Rusty Pony R	lanch		
2. (a)	3620 Oakview Court, Delray Beach, Florida 3344 Principal office address of limited liability company:	<u>15</u> (b) _	Same Mailing address of limited liab	nility company:
	(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OF	
				
_	11/20/2009	- 	.09000111874	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Eric S. Golden		<u></u>	
	Registered Agent and Registered Office shown on the records of the	he Florida De	ept. of State:	,
				ALI ALI
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		8
			<u>'</u>	人。
	, FL			Section of the sectio
	,110		 	P 290
(b)	Irene Reimanis-Aziz			
(-)	Enter name of NEW Registered Agent and/or NEW Registered	Office addre	<u>ss</u> :	च डुलं
			. ·	
	NEW Registered Office Address:			
		<u> </u>		
	, FL			
the chargent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registe ability com of the limite	red office and the business office pany, it is hereby confirmed that and liability company or as otherw	e of the registered the change(s)
\sim	one laine	_	ene Reimanis-Aziz	
	ature of a member or authorized representative of a member		Printed or typed name of si	gnee
provis the ob to mer	eby accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I do in writing of this change.	ree to act ir performan d for in Ch hereby con	n this capacity. I further agree to ce of my duties, and I am familio apter 605, F.S. Or, if this docun firm that the limited liability con	o comply with the ir with and accept ient is being filed ipany has been
Signat	ure of Registered Agent			

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

COVER LETTER

Registration Section Division of Corporations

TO:

	•
SUBJECT: Rusty Pony Ranch	
Name o	of Limited Liability Company
DOCUMENT NUMBER: L0900011187	74
The enclosed Resignation of Registered A for filing.	gent for a Limited Liability Company and fee are submitted
Please return all correspondence concernir	ng this matter to the following:
Irene Reimanis-Aziz	
Name of Person	
Rusty Pony Ranch	70
Name of Firm/Company	
3620 Oakview Court	
Address	\(\triangle \) \(\tri
•	PH
Delray Beach, FL 33445	
City/State and Zip Code	PH 1. 17
moomyirene@gmail.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this m	atter, please call:
Irene Reimanis-Aziz	at (905) 537-6411
Name of Person	at (905) 537-6411 Area Code Daytime Telephone Number
Enclosed is a check made payable to the I liability company or \$25.00 for an admini liability company.	Florida Department of State for \$85.00 for an active limited stratively dissolved, voluntarily dissolved or withdrawn limited
MAILING ADDRESS:	STREET ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

\$35.00 previously submitted

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.0115, Florida St	latutes, the undersigned,	
Eric Golden		, hereby resigns as	
	Name of Registered Agent		
Registered Agent for	Rusty Pony Ranch, LLC	· · · · · · · · · · · · · · · · · · ·	
	Name of Limited Liability (Company	
L09000111874			
Document	Number, if known		
A copy of this resigna	tion was mailed to the above listed	limited liability company at its last known address.	
The agency is termina	ted and the office discontinued on t	the 31st day after the date on which this statement is filed.	
	Eil Jeley Signature of	Resigning Agent	i
If signing on behalf of	f an entity:		SECRETALLARD
	Typed or Printed		~~:
	Capacity	——————————————————————————————————————	- 02E

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILING FEES:

\$ 85.00 Active limited liability company

\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company