

LOG000112955

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STATION
TALLAHASSEE

Ra Resignation

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Panheads Pizzeria LLC
Name of Limited Liability Company

DOCUMENT NUMBER: LO9000112955

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:

Eric J Ross
Name of Person

Panheads Pizzeria LLC
Name of Firm/Company

2507 SAXON AVE
Address

NEW SMYRNA BEACH FL 32169
City/State and Zip Code

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

For further information concerning this matter, please call:

Eric J Ross at (757) 593-3771
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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

15 MAR -9 PM 3:33
SECRET
TALLAHASSEE

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

FELICIA M Engles, hereby resigns as
Name of Registered Agent

Registered Agent for PANHEADS Pizzeria LLC
Name of Limited Liability Company

LO9000112955
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.

[Signature]
Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

15 MAR -9 PM 3:39
TALLAHASSEE, FL 32314
SECRETARY OF STATE

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withdrawn limited liability company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