# L10000006358

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL
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SECRETARY OF STATE
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AResign Tlewis 7-13-10

### **COVER LETTER**

TO:	Amendment Section	
	Division of Corporations	

SUBJECT: Keet I	Marketing, LLC Limited Liability Company	
DOCUMENT NUMBER:	L10000006358	
The enclosed Resignation of Registered Ager for filing.	nt for a Limited Liability Company and fee are s	ubmitted
Please return all correspondence concerning t	this matter to the following:	,
Alex Dias Name of Person	<u> </u>	•
Reef Marketing Name of Firm/Company		
8211 NW 64 Street, Unit#6 Address	<u>-</u>	
Miami, FL 33166 City/State and Zip Code	·	
E-mail address: (to be used for future annual repertor further information concerning this matte		
	at () 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

•	Antonio Monteiro	, hereby resigns as	
ر ۱	Name of Registered Agent	7 7	_
Registered Agent for	Reef Marke	eting, LLC	
	*. •		1.
<del></del>	Name of Limited Liability Company-	SEE.	0
L100000	<del></del>	FLOR	() ()
Document Num	ber, if known	<u>ā</u> m	
A copy of this resignation	was mailed to the above listed limited li	ability company at its last known addr	ess.
	and the office discontinued on the 31st d		
		ay after the date on which this stateme	
The agency is terminated	and the office discontinued on the 31st d	ay after the date on which this stateme	
The agency is terminated	and the office discontinued on the 31st de Manding Signature of Resigning entity:	ay after the date on which this stateme	
-	and the office discontinued on the 31st d	ay after the date on which this stateme	

**FILING FEES:** 

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company \$ 85.00 \$ 25.00

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