

L10000021184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

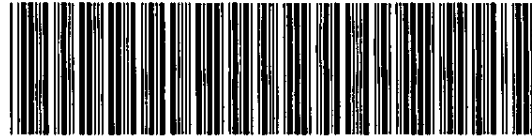
(Business Entity Name)

(Document Number)

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S. B. L. & C. P. 0000
TALLAHASSEE, FL 32301

Ra Resignation

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Doxa Hospitality (USA) LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L10000021184

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:

Nina Tarowsky

Name of Person

United Corporate Services, Inc.

Name of Firm/Company

10 Bank St. Ste. 560

Address

White Plains, NY 10606

City/State and Zip Code

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

For further information concerning this matter, please call:

Nina Tarowsky

Name of Person

at (914) 949-9188

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

FILED
14 OCT 15 PM 1:00
TALLAHASSEE, FL



United Corporate Services, Inc.

Excellent Service in Extraordinary Times

Ten Bank Street, Suite 560
White Plains, NY 10606
www.unitedcorporate.com

Toll Free (800)899-8648
Voice (914)949-9188
Fax (914)949-9618

October 9, 2014

State of Florida
Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Doxa Hospitality (USA) LLC
L10000021184

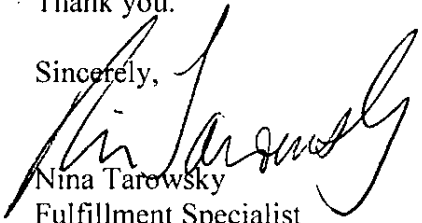
Dear Sir/Madam:

Enclosed is the Resignation of Registered Agent form for the above noted entity along with our check in the amount of \$25.00 for the filing fee.

If everything is in order, please file, forwarding a filed stamped copy to the attention of the undersigned in the enclosed envelope.

Thank you.

Sincerely,


Nina Tarowsky
Fulfillment Specialist

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

United Corporate Services, Inc.

Name of Registered Agent

, hereby resigns as

Registered Agent for Doxa Hospitality (USA) LLC

Name of Limited Liability Company

L10000021184

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 of Resigning Agent

If signing on behalf of an entity:

Michael A. Barr

Typed or Printed Name

President, United Corporate Services, Inc.

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
16 OCT 15 PM 4:23
TALLAHASSEE, FL
160000021184