# 4100000831634

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EXAMINER



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### COVER LETTER

SUBJECT: WATERHOUSE INVESTMENT GROUP LLC	
Name of Limited Liability Company	
DOCUMENT NUMBER: P10000031634	
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee ar for filing.	e submitted
Please return all correspondence concerning this matter to the following:	
MERCEDES LOPEZ CISNEROS	
Name of Person	_ B
MERCEDES LOPEZ CISNEROS PA	2 H
Name of Firm/Company	ET SER
8700 WEST FLAGLER ST. SUITE 390	SECRETARY OF CORPORATIONS VISION OF CORPORATIONS 12 HAR 19 PM 1: 48
Address	一、影
MIAM, FLORIDA 33174	8 10H
City/State and Zip Code	
lopezicisneros2003@yahoo.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Mercedes Lopez Cisneros at ( 305 ) 480-1234  Name of Person Area Code & Daytime Telephone Number	
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 actiliability company or \$25.00 for an administratively dissolved, voluntarily dissolved or with limited liability company.	ive limited hdrawn

# MAILING ADDRESS:

Amendment Section

TO:

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**

Pursuant to the provision	s of section 608.416	(2) or 608.509, Flor	ida Statutes, the undersigned,	A CONSTRUCTION
SANDRA	LANDA		, hereby resigns as	10 CO 15
	Name of Registered Age	nt	,	<b>4</b>
Registered Agent for	WATERHOUSE	INVESTMENT	GROUP LLC	—— !;
	Name of Lin	nited Liability Compan	y	,
L10000031634				
Document Nu	mber, if known			
	l and the office disco		liability company at its last know day after the date on which this s	
TG :	7	Signature of Resigni	ng Agent	
If signing on behalf of ar	n entity:			
	SANDRA	LANDA		
		Typed or Printed Name ERED AGENT		
		Capacity	· · · · · · · · · · · · · · · · · · ·	

Active limited liability company
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withdrawn limited liability company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