L10000117053

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		ŀ

Office Use Only



400258418714

400258418714 03/31/14--01057--011 **507.50



COVER LETTER

NEXT CONCERT TECHNICLOGIES I. C		
SUBJECT: NEXT CONCEPT TECHNOLOGIES LLC. Name of Limited Liability Company		
CUMENT NUMBER: <u>L10000117053</u>		
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:		
Tiffany Roth Name of Person		
National Corporate Research, Ltd. Name of Firm/Company		
615 S Dupont Hwy Address		
Dover, DE 19901 City/State and Zip Code		
Statrep@nationalcorp.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:		
Tiffany Roth at (866) 621-3524 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

TO:

Amendment Section Division of Corporations

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, Florida Statutes, the	undersigned,
Nationa	Corporate Research, Ltd. , hereb	y resigns as
Registered Agent for	NEXT CONCEPT TECHNOLOGI	ES LLC.
	Name of Limited Liability Company	,
L10000	117053	
Document Nu	mber, if known	
A copy of this resignation	n was mailed to the above listed limited liability compar	y at its last known address.
The agency is terminated	and the office discontinued on the 31st day after the day	te on which this statement is filed.
	A. W. Signature of Resigning Agent	<u> </u>
If signing on behalf of a	n entity:	
	Andrew Lundgren Typed or Printed Name	1 K 3
	V.P., National Corporate Research, Ltd.	
	Capacity	. 7

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