

L10000118971

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2013 MAR 11 AM 9:12
CLERK OF STATE
TALLAHASSEE, FLORIDA

J. SAULSSETT
EXAMINER

MAR 12 2013

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: REDVINE WINES, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L10000118971

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:

Valerie Rodriguez

Name of Person

PARACORP INCORPORATED

Name of Firm/Company

2804 Gateway Oaks Dr # 200

Address

Sacramento, CA 95833

City/State and Zip Code

annualreports@myparacorp.com

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

For further information concerning this matter, please call:

Valerie Rodriguez

Name of Person

at (888) 272-5449

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

DEPT OF STATE
TALLAHASSEE, FLORIDA

2013 MAR 11 AM 9:12

FILED

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

PARACORP INCORPORATED

Name of Registered Agent

Registered Agent for **REDVINE WINES, LLC**

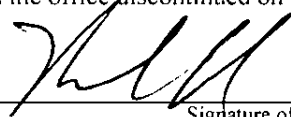
Name of Limited Liability Company

L10000118971

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:

Ninh Ho

Typed or Printed Name

Asst. Secretary, Paracorp Incorporated

Capacity

FILED
2013 MAR 11 AM 9:12
TALLAHASSEE, FLORIDA
FLORIDA DEPARTMENT 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:
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P.O. Box 6327
Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

PARACORP INCORPORATED

Name of Registered Agent

, hereby resigns as

Registered Agent for

REDVINE WINES, LLC

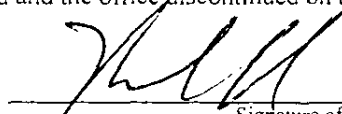
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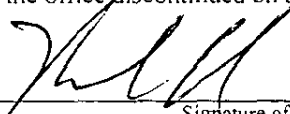
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