

LI10000 203 98

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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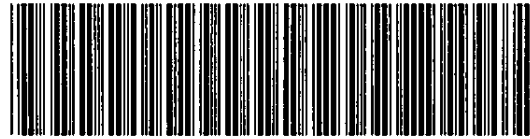
(Business Entity Name)

(Document Number)

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13 JUN 12 PM 4:59
CLERK OF COURT
TALLAHASSEE, FLORIDA

JUN 13 2013
D. BUTLER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Get Paid 2 Recycle LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L11000020398

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:

Nicholas Daidone

Name of Person

Name of Firm/Company

7955 NW 128th Lane

Address

Parkland, FL 33076

City/State and Zip Code

ndaidone@att.net

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

For further information concerning this matter, please call:

Nicholas Daidone

Name of Person

at (954) 341-5688

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

FILED
13 JUN 12 PM 59
TALLAHASSEE, FLORIDA

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,

Nicholas Daidone

_____, hereby resigns as
Name of Registered Agent

Registered Agent for **Get Paid 2 Recycle LLC**

Name of Limited Liability Company

L11000020398

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:

Nicholas Daidone

Typed or Printed Name

Resigning Registered Agent

Capacity

FILED
13 JUN 12 PM 4:59
TALLAHASSEE, FLORIDA

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