## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES

Account Number : 075350000353 Phone : (8<del>00</del>)221-2972 Fax Number : (888)692-9256

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

## LLC REGISTERED AGENT RESIGNATION PLAINLITE PROPERTIES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

## **COVER LETTER**

18 NOV 26	AM 8: 52
TALL AHASS	EE. FLORIDA

TO: Registration Section Division of Corporations

Name of Person Area Co	ode Daytime Telephone Number
TRACEE COTTON 800	221-2972 X1550
For further information concerning this matter, please ca	II:
E-mail address: (to be used for future annual report notification	n)
City/State and Zip Code	
BROOKLYN, NY 11241	
PROOFF VALABLE 41241	
Address	
16 COURT ST 14TH FLOOR	
Name of Firm/Company	- <del></del>
BLUMBERGEXCELSIOR CORPORATE SERVICE	ES,
Name of Person	
TRACEE COTTON	
Please return all correspondence concerning this matter t	to the following:
The enclosed Resignation of Registered Agent for a Limfor filing.	ited Liability Company and fee are submitted
DOCUMENT NUMBER: L11000043123	
	шу Сопралу
SUBJECT: PLAINLITE PROPERTIES, LLC  Name of Limited Liab	11
DI AINI ITE DEODERTIES I I C	

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

18 HOV 26 AM 8: 52

## STATEMENT OF RESIGNATION OF REGISTERED ASSENT OR STATE FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,
BLUMBERGEXCELSIOR CORPORATE SERVICES, INC., hereby resigns as
Name of Registered Agent
Registered Agent for PLAINLITE PROPERTIES, LLC
Name of Limited Liability Company
L11000043123
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
f signing on behalf of an entity:
ZEINA HASSOUN
Typed or Printed Name
ASSISTANT SECRETARY
Capacity

FILING PEES:
\$ 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