

L11000053965

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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12 SEP -4 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

D. BRUCE

SEP 04 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 13, 2012

ROBIN MOLT  
80 STATE STREET 10TH FL  
ALBANY, NY 12207

SUBJECT: FINEST TENTS LLC  
Ref. Number: L11000053965

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FILED

We have received your document for FINEST TENTS LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Signature of individual on behalf of the company is required.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 812A00020820

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FINEST TENTS LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L11000053965

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:

ROBIN MOLT  
Name of Person

CORPORATION SERVICE COMPANY  
Name of Firm/Company

80 STATE STREET 10TH FL  
Address

ALBANY NY 12207  
City/State and Zip Code

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

For further information concerning this matter, please call:

ROBIN MOLT at ( 518 ) 433-7018  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:**

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

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## 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,

CORPORATION SERVICE COMPANY

Name of Registered Agent

, hereby resigns as

Registered Agent for FINEST TENTS LLC

Name of Limited Liability Company

L11000053965

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.

CORPORATION SERVICE COMPANY

Robin Molt

Signature of Resigning Agent

If signing on behalf of an entity:

ROBIN MOLT

Typed or Printed Name

asst secretary

Capacity

### **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

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