# L110000080366

(Re	equestor's Name)	<del></del>
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3 JUN 20 PM 4: SECRETARY OF STATE

C. LEWIS

June 21,2013

EXAMINER



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 17, 2012

MARK ROOFE / M5 11820 MIRAMAR PARKWAY SUITE 212 MIRAMAR, FL 33025

SUBJECT: PB RECORDING AND LICENSING WORLDWIDE LLC

Ref. Number: L11000080366

We have received your document for PB RECORDING AND LICENSING WORLDWIDE LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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

Letter Number: 712A00025599

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

### **COVER LETTER**

TO: Amendment Section Division of Corporations	
1 11	ANI) LICENSING LLC  d Liability Company
DOCUMENT NUMBER: 2 77/2	20000000000
The enclosed Resignation of Registered Agent for for filing.	a Limited Liability Company and fee are submitted
Please return all correspondence concerning this m	natter to the following:
HANS LINIFEH  Name of Person	······································
Name of Firm/Company	TON
4569 WILLEROS) DET	<u>E</u>
Address / Address / TO 3 / City/State and Zip % ode	33495
E-mail address: (to be used for future annual report not	ification)
For further information concerning this matter, ple  ABAC BENETIFICATION  at (	ase call:  56/ 926/707/ Area Code & Daytime Telephone Number
Enclosed is a check made payable to the Florida D liability company or \$25.00 for an administratively liability company.	dissolved, voluntarily dissolved or withdrawn limited
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
	i ananassee, fl 3230 i

## 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,
HANS		resigns as
N	ame of Registered Agent	
Registered Agent for	MB RECOLVEY AND LIC	they UC
		·····
	Name of Limited Liability Company	
L 110000	080366	
Document Numb	per, if known	
A copy of this resignation	was mailed to the above listed limited liability company	y at its last known address.
The agency is terminated a	Signature of Resigning Agent	e on which this statement is filed.
If signing on behalf of an e	entity:	SECRE
	Typed or Printed Name	JUN 20 AHASSEE
_	Capacity	PRI 4: 5

**FILING FEES:** \$ 85.00 Activ \$ 25.00 Admi Active limited liability company
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