

211000112154

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

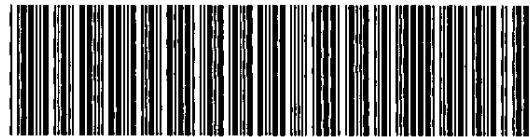
(Business Entity Name)

(Document Number)

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12 DEC -6 PM 4:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

D. BRUCE

DEC 07 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 26, 2012

LARRY L. ADAIR, P.A.
LARRY L. ADAIR
2400 WEST SAMPLE ROAD, SUITE #7
POMPANO BEACH, FL 33073

SUBJECT: BOS WAREHOUSE GROUP, LLC
Ref. Number: L11000112154

We have received your document for BOS WAREHOUSE GROUP, LLC and your check(s) totaling \$157.50. 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.

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: 212A00028126

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BOS WAREHOUSE GROUP, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L11000112154

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:

Larry L. Adair, Esquire

Name of Person

LARRY L. ADAIR, P. A.

Name of Firm/Company

2400 West Sample Road # 7

Address

Pompano Beach, Florida 33073

City/State and Zip Code

larry@lladairlaw.com

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

For further information concerning this matter, please call:

LARRY L. ADAIR, ESQ. at (954) 978-1466

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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SECRETARY OF STATE
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,

LARRY L. ADAIR

_____, hereby resigns as
Name of Registered Agent

Registered Agent for **BOS WAREHOUSE GROUP, LLC, a Florida limited liability company**

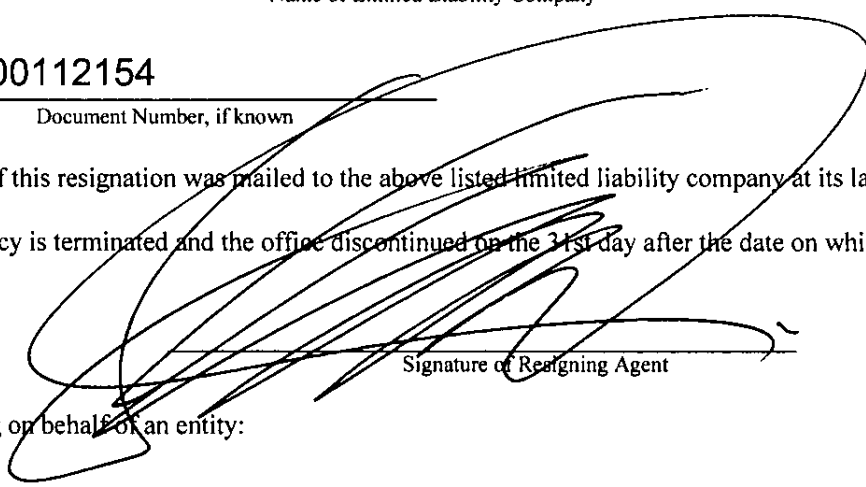
Name of Limited Liability Company

L11000112154

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:

Typed or Printed Name

Capacity

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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