L16000389164

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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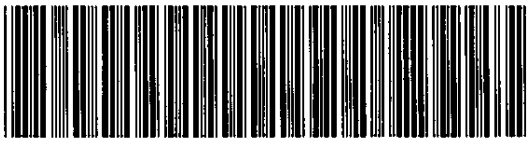

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JUN 09 2016

S. YOUNG

# COVER LETTER

**TO:** Registration Section
Division of Corporations

**SUBJECT:** Gold Rush Concessions
Name of Limited Liability Company

**DOCUMENT NUMBER:** L12000038964

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:

Andrew Stenger
Name of Person

N/A
Name of Firm/Company

1416 82nd Ave Lot 60
Address

Vero Beach FL 32966
City/State and Zip Code

moefire134@aol.com
E-mail address: (to be used for future annual report notification)

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16 JUN -8 PM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Andrew Stenger at (772) 633-7790
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$85.00 for an active limited liability company or $25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:**
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)

# STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Andrew Stenger, hereby resigns as
Name of Registered Agent

Registered Agent for Gold Rush Concessions, LLC
Name of Limited Liability Company

L12000038964
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

FILED
16 JUN -8 PM 12: 12
SECRETARY OF STATE
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**

INHS17 (2/14)