





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 27, 2017

ABIEL BALLESTEROS  
5805 BLUE LAGOON DR, #178  
MIAMI, FL 33145

SUBJECT: CONCESSION MANAGEMENT LLC  
Ref. Number: L12000064214

We have received your document for CONCESSION MANAGEMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$60.00.

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

Octavia L Simmons  
Regulatory Specialist II

Letter Number: 917A00023834

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Concession Management LLC  
Name of Limited Liability Company

DOCUMENT NUMBER: L12000064214

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:

Abiel Ballesteros  
Name of Person

Concession Management LLC.  
Name of Firm/Company

5805 Blue Lagoon Drive #178  
Address

Miami, FL 33145  
City/State and Zip Code

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

For further information concerning this matter, please call:

Abiel Ballesteros at (786) 355 6646  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

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

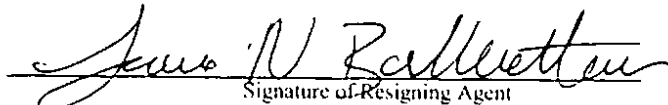
Gladys N. Ballesteros, hereby resigns as  
Name of Registered Agent

Registered Agent for Concession Management LLC  
Name of Limited Liability Company

L12000064214  
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:

Gladys N Ballesteros  
Typed or Printed Name  
President  
Capacity

FILED  
17 DEC 19 PM 2:00  
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