

L/2000068215

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(Business Entity Name)

(Document Number)

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2013 JUL 24 PM 2:45  
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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 2, 2013

JOE A. CATARINEAU, JD, CPA  
91750 OVERSEAS HIGHWAY  
TAVERNIER, FL 33070

SUBJECT: PAESANOS LITTLE ITALY, LLC  
Ref. Number: L12000068215

We have received your document for PAESANOS LITTLE ITALY, 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.

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) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 213A00016409

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PAESANOS LITTLE ITALY, LLC  
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

JOE A. CATARINEAU, JD, CPA  
(Contact Person)

JOE A. CATARINEAU, PA  
(Firm/Company)

91750 OVERSEAS HIGHWAY  
(Address)

TAVERNIER, FL 33070  
(City/State and Zip Code)

For further information concerning this matter, please call:

JOE A. CATARINEAU at ( 305 ) 852-4833  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &  
Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

FILED  
2013 JUL 24 PM 2:44  
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,

**SUZANNE CAFFARO**

Name of Registered Agent

Registered Agent for **PAESANOS LITTLY ITALY, LLC**


Name of Limited Liability Company

**L12000068215**

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

### **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

FILED  
2018 JUN 24 PM 2:44  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE