

L12000100505

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H12000268245 3)))



H120002682453ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

12 NOV -9 PM 1:18
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 NOV -9 PM 3:08
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC REGISTERED AGENT RESIGNATION
6516 RE VENTURE, LLC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$85.00

D. BRUCE

NOV 13 2012

EXAMINER
Help

Electronic Filing Menu

Corporate Filing Menu

H12000268245

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 16516 RE VENTURE, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L12000100505

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:

MARIA FELIPE DE NAVA
Name of Person

Name of Firm/Company

1240 NE 93 ST.
Address

MIAMI SHORES, FL 33138
City/State and Zip Code

MARIA-FELIPE@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Felipe De Nava at 786 334-5727
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

12 NOV - 9 PM 1:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

H12000268245

H12000268245

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,

ARC INVESTMENTS PARTNERS, LLC, hereby resigns as
Name of Registered Agent

Registered Agent for LSIL RE VENTURE, LLC
Name of Limited Liability Company

L12000100505
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:

Julianna Castro
Typed or Printed Name
Managing Member
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

INHS17 (08/05)

12 NOV -9 PM 1:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

H12000268245