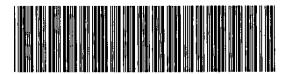
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

JUN - 1 2015 T CANNON

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Zuleta Enterprises, LLC  Name of Limited Liability Company  DOCUMENT NUMBER: L12000124246
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:
Julio Zuleta Name of Person
ZULETA ENTERPRISES, LLC Name of Firm/Company
16381 SHENANDOAH CIRCLE Address
ET MYERS FL 33908 City/State and Zip Code
ZULY 15 EEN @ YAHOO. COM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TULIO ZULETA at (239) 281-7556  Name of Person at (239) 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:STREET ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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

Pursuant to the provisions	of section 605.0115, F	lorida Statutes, the undersigned,		
Stacey	Zuleta  Jame of Registered Agent	, hereby resigns as	5	SEC
/ <i>P</i>	lame of Registered Agent		HAY	추深
Registered Agent for	tuleta	Enterprises, LLC	7 2 <del>8</del> 8	TARY O
	Name of Limited	Liability Company		, <u> </u>
	. valie of Daliston	Buointy Company	<del></del>	역급
L1200	0124246		<b>փ</b> ։ 05	AGN TE
Document Num	ber, if known	_		
A copy of this resignation	was mailed to the abov	e listed limited liability company at its last	known address.	
The agency is terminated	100	ued on the 31st day after the date on which	this statement is	filed.
If signing on behalf of an	entity:			
_	Star	cey Zuleta		
	Typed	or Printed Name		
-	Mana	or Printed Name		
	(	Sapacity 7		

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company