

L12000135852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

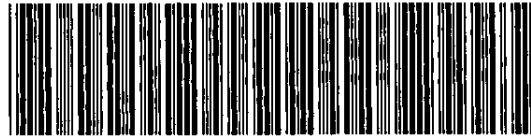
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300243879353

01/29/13--01020--028 **85.00

FILED

2013 JAN 29 PM 12:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 140 NW 80 LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L12000135852

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:

Russell Levene
Name of Person

~~140 NW 80 LLC~~ BRIGHT STAR USA LLC
Name of Firm/Company

14901 S. UNIVERSITY DRIVE - SUITE 250
Address

DAVIE, FL 33328
City/State and Zip Code

RUSS.LEVENE@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RUSSELL LEVENE at (954) 614 4385
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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,

Aisha Moodie, hereby resigns as

Name of Registered Agent

Registered Agent for 140 NW 80 LLC

Name of Limited Liability Company

L 12000135852

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.

Aisha R. Moodie
Signature of Resigning Agent

If signing on behalf of an entity:

Aisha R. Moodie
Typed or Printed Name

As Managing Member
Capacity

FILED
2013 JAN 29 PM 12:28
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