

L13000005214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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CLERK OF STATE  
TALLAHASSEE FLORIDA

FEB 10 2014

D. BRUCE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 24, 2014

LOURDES ROOT  
237 176TH TERRACE DRIVE E  
REDINGTON SHORES, FL 33708

SUBJECT: BRIDES BY THE SEA "L.L.C."  
Ref. Number: L13000005219

We have received your document for BRIDES BY THE SEA "L.L.C" and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

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) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 414A00001662

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CLERK OF THE COURT

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Brides by the Sea, LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L13000005219

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:

Lourdes Root

Name of Person

Name of Firm/Company

237 176th Terrace Drive E

Address

Redington Shores, FL 33708

City/State and Zip Code

lulu\_42@me.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lourdes Root

Name of Person

at (813) 428-4999

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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TALLAHASSEE FLORIDA

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

**Lourdes Root**

Name of Registered Agent

, hereby resigns as

Registered Agent for **Brides by the Sea, LLC**

**19707 Gulf Blvd. Indian Shores, FL 33785**

Name of Limited Liability Company

**L13000005219**

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:

**Lourdes Root**

Typed or Printed Name

**MGR / MGRM**

Capacity

**FILED**  
2014 FEB - 7 PM 1:05  
CLERK 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