

#L 1300028031

(Requestor's Name)

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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

FEB 13 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 27 North USA, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L13000028031

- * 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:

Daniel A Paolillo

Name of Person

27 North USA, LLC

Name of Firm/Company

2221 22nd Lane

Address

Palm Beach Gardens, FL 33418

City/State and Zip Code

pag@gallogroup.com

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

For further information concerning this matter, please call:

Phil Gallo

Name of Person

at (561) 371-9694

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

STREET ADDRESS:

Registration 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 605.0115, Florida Statutes, the undersigned,

Daniel A Paolillo

Name of Registered Agent

, hereby resigns as

Registered Agent for

27 North USA, LLC

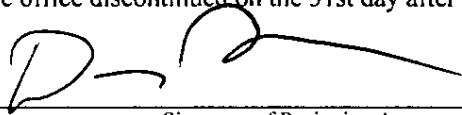
Name of Limited Liability Company

L13000028031

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:

Daniel A Paolillo

Typed or Printed Name

MGRM

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

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