

L13 0000 45922

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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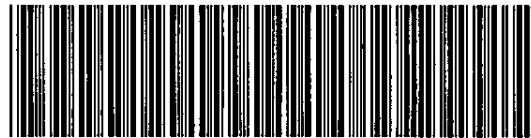
(Business Entity Name)

(Document Number)

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J. Stivers FEB 21 2014

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Lighthouse Enterprises Retail Services, LLC  
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

**Rebekkah Green**

(Contact Person)

**Lighthouse Enterprises Retail Services, LLC**

(Firm/Company)

**1920 Ector Road**

(Address)

**Jacksonville, FL 32211**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Rebekkah Green**

(Name of Contact Person)

at ( **904** ) **612-0654**

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☐ \$55 Filing Fee &  
Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OR DISSOCIATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Lighthouse Enterprises Retail Services, LLC

2. The Florida document/registration number of this limited liability company is:  
L13000045922

3. The date this member withdrew or will withdraw is: Jan.28.2014

4. I, Kui Peng, hereby resign as a Vice President  
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Resigning or Dissociating Manager, Member

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

14 FEB 20 11:10:24  
STATE  
TALLAHASSEE, FLORIDA