

L13000073854

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

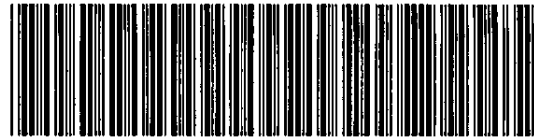
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Resignation
OO RA

05/09/14--01023--027 **60.00

04/16/14--01025--015 **25.00

FILED
2014 MAY -9 PM 1:13
TALLAHASSEE, FLORIDA

OR
5/12/14

**00678, 00671*



RECEIVED

1/11/14 - P 4410 05

FLORIDA DEPARTMENT OF STATE
Division of Corporations

B.

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April 23, 2014

Paul E. Kelly
Palm Beach Woodworks Installations
118 Plantation Blvd.
Lake Worth, FL 33467

SUBJECT: PALM BEACH WOODWORKS INSTALLATIONS LLC
Ref. Number: L13000073854

We have received your document for PALM BEACH WOODWORKS INSTALLATIONS LLC and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$60.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

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) 245-6050.

Annette Ramsey
Regulatory Specialist II

Letter Number: 114A00008688

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Palm Beach Woodworks Installations LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L13000073854

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:

Paul E Kelly
Name of Person

Palm Beach Woodworks Installations
Name of Firm/Company

118 Plantation Blvd.
Address

Lake Worth FL 33467
City/State and Zip Code

Paul e Kelly 311 @ yahoo . com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul Kelly at (561) 255-8369
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:

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

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

FILED
2014 MAY -9 PM 1:13
TALLAHASSEE, FLORIDA

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

Paul E Kelly, hereby resigns as
Name of Registered Agent

Registered Agent for Palm Beach Woodworks INSTALLATIONS LLC

Name of Limited Liability Company

L13000073854

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.

Paul E Kelly
Signature of Resigning Agent

If signing on behalf of an entity:

Paul E Kelly
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