

L13000154464

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(Address)

(City/State/Zip/Phone #)

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14 AUG 11 PM 2:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

RA Resignation

AUG 20 2015
T. LEMIEUX

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MINDFULL ENTERTAINMENT LLC.
Name of Limited Liability Company

DOCUMENT NUMBER: L13000154464

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:

PATRICK ALVAREZ
Name of Person

MINDFULL ENTERTAINMENT LLC.
Name of Firm/Company

8425 WILTON DRIVE
Address

WEST PALM BEACH FL 33406
City/State and Zip Code

VICTOR@mindfull-ent.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRIANNA RAICH at (561) 3108512
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

NICHOLAS SALVATORE RAICH, JR, hereby resigns as
Name of Registered Agent

Registered Agent for MINDFULL ENTERTAINMENT LLC

Name of Limited Liability Company

L13000154464

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.

If signing on behalf of an entity:


Signature of Resigning Agent

Capacity

FILED
14 AUG 11 PM 2:18
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withdrawn limited liability company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