## L14000066639

(Re	equestor's Name)	<del> – </del>		
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

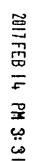
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 30, 2017

DIANA DAVIS BASTA, ESQ. 31111 US HWY 19 N PALM HARBOR, FL 34684

SUBJECT: ST GEORGE AND ST KARA'S ENTERPRISES LLC

Ref. Number: L14000086639

We have received your document for ST GEORGE AND ST KARA'S ENTERPRISES LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FL CORPORATION, but your entity is a FL LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions 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.

Dionne M Scott Regulatory Specialist II

Letter Number: 317A00001820

www.sunbiz.org

## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJ	JECT: ST. GEORGE AND ST. K	ARA'S ENTERF		
DOC	UMENT NUMBER: L14000086		,	
The e	nclosed Resignation of Registered ing.	Agent for a Limite	ed Liability Company	and fee are submitted
Pleas	e return all correspondence concern	ing this matter to	the following:	
DIAN	NA DAVIS BASTA			
	Name of Person		_	
DAV	IS BASTA LAW FIRM, P.A.			
	Name of Firm/Company	y	<del></del>	
3111	1 U.S. HWY 19 N			
•	Address		_	
PALI	M HARBOR, FL 34667			
	City/State and Zip Code	•	_	
ayma	anfarag911@yahoo.com			
F	E-mail address: (to be used for future annu	al report notification)	_	
For fi	urther information concerning this i	natter, please call:		
DIAN	NA DAVIS BASTA	727 at (	938-2255	
	Name of Person	Area Cod	e Daytime Telephone	Number
liabil	osed is a check made payable to the ity company or \$25.00 for an admirity company.	Florida Departme nistratively dissolv	nt of State for \$85.00 red, voluntarily dissolv	ved or withdrawn limited
	LING ADDRESS:		EET ADDRESS:	
_	stration Section ion of Corporations	Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		
	Box 6327	Clifton Building		
	hassee, FL 32314	2661	Executive Center Circ	lle 製用 あ

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

Pursuant to the provisions of section 605.0115	5, Florida Statutes, the undersigned,
DAVIS BASTA LAW FIRM, P.A.	, hereby resigns as
Name of Registered Agen	
Registered Agent for ST. GEORGE AND	ST. KARA'S ENTERPRISES, LLC
Name of Lim	ited Liability Company
L14000086639	
Document Number, if known	<del></del>
	above listed limited liability company at its last known address.
The agency is terminated and the office discol	ntinued on the 31st day after the date on which this statement is filed.  Signature of Resigning Agent
If signing on behalf of an entity:	·
DIANA DAVIS B	ASTA
T	yped or Printed Name
PRINCIPAL	
	Capacity
FILING \$ 85.00 \$ 25.00	FEES: Active limited liability company Administratively dissolved/voluntarily dissolved/ withdrawn limited liability company  Division of Corporations
Make checks payab	Division of Corporations P.O. Box 6327

Tallahassee, FL 32314