Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: INCORP SERVICES INC

Account Number : I20120000007

: (702)866-2500

Fax Number

: (702)866-2689

**Enter the email address for this business entity to be used for Auture annual report mailings. Enter only one email address please 🎇

LLC REGISTERED AGENT RESIGNATION **MOLERO ENTERPRISE, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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Corporate Filing Menu

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MOLERO ENTERPRISE, LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L14000098091	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to th	e following:
Wendy Hefley	
Name of Person	
Incorp Services, Inc.	
Name of Firm/Company	
3773 Howard Hughes Parkway, Suite 500S	•
Address	
Las Vegas, NV 89169-6014	
City/State and Zip Code	
processing@incorp.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Incorp Services, Inc./Wendy Hefley at (at (at (at (at (at (at (at (866-2500 ext 6601
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115, Florida Statutes, the	e undersigned,	
Incorp Services, I	nc.	, hereby resigns as	
	Name of Registered Agent	, ,	
Registered Agent for _	MOLERO ENTERPRISE, LLC	· · · · · · · · · · · · · · · · · · ·	
	Name of Limited Liability Company		
L14000098091			
Document N	lumber, if known		
A copy of this resignat	ion was mailed to the above listed limited lia	ability company at its last known address.	
The agency is terminat	ed and the office discontinued on the 31st da	ay after the date on which this statement is filed.	
If signing on behalf of	Signature of Resigning A	Agent AHAY - 9	
• • • • • • • • • • • • • • • • • • • •	Wendy Hefley for Incorp Services,		
	Typed or Printed Name		
	Authorized Representative	CORA SIA	
	Capacity		

FILING FEES: \$ 85.00 Active Active limited liability company
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