# L14000171164

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### **COVER LETTER**

SUBJECT:  Name of Limited Liability	Company
DOCUMENT NUMBER: L14000171164	
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 the	e following:
E. MURRAY MOORE, JR.	
Name of Person	
PENNINGTON P.A.	
Name of Firm/Company	
215 S. MONROE STREET, SUITE 200	
Address	
TALLAHASSEE, FL 32301	
City/State and Zip Code	
MURRAY@PENNINGTONLAW.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
E. MURRAY MOORE, JR. 850	222 - 3533
Name of Person Area Code	) Daytime Telephone Number

#### MAILING ADDRESS:

**TO:** Registration Section Division of Corporations

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	5, Florida Statutes, the undersigned,
PENNINGTON P.A.	, hereby resigns as
Name of Registered Agen	
Registered Agent for HAMBURGER HIL	L FAMILY RESTAURANT, LLC
Name of Limi	ited Liability Company
L14000171164	
Document Number, if known	
A copy of this resignation was mailed to the a	bove listed limited liability company at its last known address.
The agency is terminated and the office discor	ntinued on the 31st day after the date on which this statement is filed.  Signature of Resigning Agent
It signing on behalf of an entity:  E. Mur  Ty  as Preside  FILING \$ 85.00 \$ 25.00	ray Moore, Jr.  Specific Printed Name  Part, Pennington, AA.  Capacity  FEES:  Active limited liability company Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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