

L16000019538

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2017 JAN 18 P 4 21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren

JAN 19 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 5, 2017

MICHAEL DENNEHY
10180 FEATHER RIDGE DR
WEEKI WACHEE, FL 34613

SUBJECT: ENCHANTED CELEBRATIONS LLC
Ref. Number: L16000019538

We have received your document for ENCHANTED CELEBRATIONS 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 CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 517A00000292

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Enchanted Celebrations LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L16000019538

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:

Michael Dennehy
Name of Person

10180 Feather Ridge Dr
Name of Firm/Company
Address

Weeki Wachee, FL 34613
City/State and Zip Code

mikedennehy.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Dennehy at 214, 893-0616
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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,

Michael Dennehy, hereby resigns as
Name of Registered Agent

Registered Agent for Enchanted Celebrations LLC
Name of Limited Liability Company

L16080819538
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.

[Signature]
Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

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2011 JAN 18 P 4:27
SECRETARY OF STATE
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