116000033892

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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(Document Number)				
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FLORIDA DEPARTMENT OF STATE

Division of Corporations

PM 2: 1

March 1, 2017

ANDREA CABRERA PALM TREE PARTS LLC 900 NE 12 AVENUE #106 HALLANDALE, FL 33009

SUBJECT: PALM TREE PARTS LLC.

Ref. Number: L16000033892

We have received your document for PALM TREE PARTS LLC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign (--)

An individual must sign on behalf of the business entity you have designated as the registered agent.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 417A00003915

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Palm Type Parts LC Name of Limited Liability Company DOCUMENT NUMBER: L 16000033892	
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:	
Andrea Cabtera Name of Person Palm Thee Parts LLC	
Name of Firm/Company	
900 NE 12 are #1 106	i
City/State and Zip Code	: !;
E-mail address: (to be used for future annual report notification)	之 //
For further information concerning this matter, please call:	The second
Name of Person at () Area Code Daytime Telephone Number	1.

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

rursuant to the provisions o	i section 605.0115, Florida Statutes, the undersigned.	
	ne of Registered Agent	
Nai	ne of Registered Agent	
Registered Agent for	Palm Tree Parts LLC	
	Name of Limited Liability Company	•
LI 6000 Document Number		
A copy of this resignation w	as mailed to the above listed limited liability company at its last kno	wn address.
The agency is terminated an	d the office discontinued on the 31st day after the date on which this	statement is filed.
	Signature of Resigning Agent	TALL
If signing on behalf of an en	tity:	RETARY AHASS
	Typed or Printed Name	
	Capacity	# 10

FILING FEES: \$85.00 Activ

\$ 25.00

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