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Division of Corporations

L16000051269

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : DELOACH, HOFSTRA & CAVONIS, P.A.
Account Number : I19990000123
Phone : (727)397-5571
Fax Number : (727)393-5418

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

Email Address: Karen@DHCLAW.com

19 FEB 11 AM 9:55
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LLC REGISTERED AGENT RESIGNATION
AMJ CATERING & EVENTS, LLC

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FACSIMILE AUDIT NUMBER H19000048748 3

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

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

PETER T. HOFSTRA

, hereby resigns as

Name of Registered Agent

Registered Agent for AMJ CATERING & EVENTS, LLC

Name of Limited Liability Company

L16000051269

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 of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name_____
Capacity**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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

INHS17 (2/14)

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TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS