

L16000097834

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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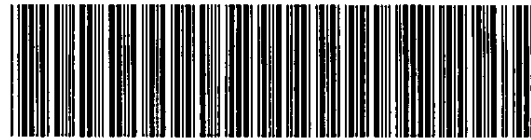
(Business Entity Name)

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TALLAHASSEE, FLORIDA

D. SCOTT
FEB 22 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Maria V. Art & Design, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L16000097834

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:

Sarah P. Vickers

Name of Person

Indiantown Law, LLC..

Name of Firm/Company

4969 SE Dixie Hwy.

Address

Stuart, FL 34997

City/State and Zip Code

mv.aquirre65@gmail.com

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

For further information concerning this matter, please call:

Maria Aguirre

at (772) 284-6140
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Indiantown Law, LLC.

Name of Registered Agent

Registered Agent for Maria V. Art & Design, LLC

Name of Limited Liability Company

L16000097834

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.

Sarah P. Vickers, Esq.

Signature of Resigning Agent

If signing on behalf of an entity:

Sarah P. Vickers, Esq.

Typed or Printed Name

MGRM

Capacity

FILING FEES:

\$ 85.00	Active limited liability company
\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

FILED
17 FEB 21 PM 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Make checks payable to Florida Department of State and mail to:

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314