

L17000053239

(Requestor's Name)

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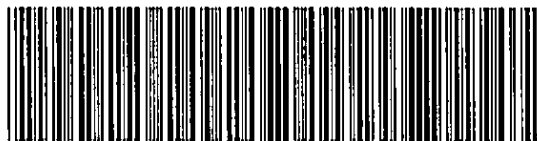
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 MAR -2 PM 3:14

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MAR 05 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 16, 2018

JACQUELINE A SALCINES  
706 S DIXIE HWY 2ND FLOOR  
CORAL GABLES, FL 33146

SUBJECT: 800 CLAUGHTON DRIVE, LLC  
Ref. Number: L17000053239

We have received your document for 800 CLAUGHTON DRIVE, LLC and your check(s) totaling \$80.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a fee of \$5.00 due.

Please return the corrected original and one copy of 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.

Brittany M Figueroa  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 418A00003394

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 800 CLAUGHTON DRIVE LLC  
Name of Limited Liability Company

DOCUMENT NUMBER: L 17 000053239

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:

JACQUELINE A. SALCINES ESQ.  
Name of Person

JACQUELINE A. SALCINES PA  
Name of Firm/Company

706 S. DIXIE HWY 2ND FLOOR  
Address

CORAL GABLES FL 33146  
City/State and Zip Code

J. SALCINES @ SALCINESLAW.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacqueline Salcines at ( 305 ) 669-5280  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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,

Jacqueline A. Salcines, hereby resigns as  
Name of Registered Agent

Registered Agent for 800 Cloughton Drive, LLC  
Name of Limited Liability Company

L17000053239  
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.

Jacqueline A. Salcines  
Signature of Resigning Agent

If signing on behalf of an entity:

Jacqueline Salcines, Esq.  
Typed or Printed Name

Attorney  
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

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