

L21000497474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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10/1/07

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RC Premier Property Holdings, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L21000497474

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:

Abby Rosengren

Name of Person

Main Street Business Services, LLC

Name of Firm/Company

1883 W Royal Hunte Dr. Ste. 200

Address

Cedar City, UT 84720

City/State and Zip Code

abby@mainstreetbusiness.com

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

For further information concerning this matter, please call:

Abby Rosengren

at (

435

288-0922 ext 007

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

REGISTERED AGENT SOLUTIONS, INC.

Name of Registered Agent

hereby resigns as

Registered Agent for RC Premier Property Holdings, LLC

Name of Limited Liability Company

L21000497474

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.

Ryan DeAnda

Signature of Resigning Agent

If signing on behalf of an entity:

Ryan DeAnda

Registered Agent Solutions, Inc.

Typed or Printed Name

Asst. Sec.

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withdrawn limited liability company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

L21000491916

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

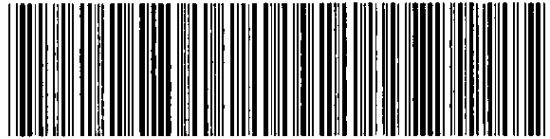
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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Office Use Only



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U.S. DEPT. OF JUSTICE

U.S. DEPT. OF JUSTICE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mayfair Real Estate Investments, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L21000491916

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:

Abby Rosengren

Name of Person

Main Street Business Services, LLC

Name of Firm/Company

1883 W Royal Hunte Dr. Ste. 200

Address

Cedar City, UT 84720

City/State and Zip Code

abby@mainstreetbusiness.com

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

For further information concerning this matter, please call:

Abby Rosengren

Name of Person

at (

435

Area Code

288-0922 ext 007

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.

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Tallahassee, FL 32314

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Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

REGISTERED AGENT SOLUTIONS, INC.

Name of Registered Agent

, hereby resigns as

Registered Agent for Mayfair Real Estate Investments, LLC

Name of Limited Liability Company

L21000491916

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.



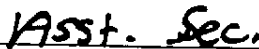
Signature of Resigning Agent

If signing on behalf of an entity:



Registered Agent Solutions, Inc.

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