

L22 000 318 789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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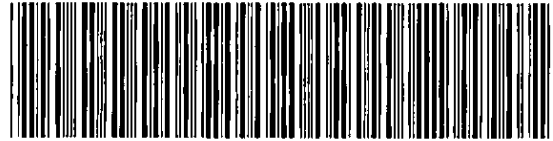
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
24 JUN 13 AM 5:21
CLERK OF SUPERIOR COURT
ALABAMA

CF-85.00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BUILT FRESH FLORIDA LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L22000318789

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:

JAMES WATERS
Name of Person

BUILT FRESH FLORIDA LLC
Name of Firm/Company

2552 S. Scenic Highway
Address

Lake Wales, FL 33898
City/State and Zip Code

jimmy@builtfreshflorida.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Waters at (407) 840-7058
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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,

Carlos Unzueta _____, hereby resigns as

Name of Registered Agent

Registered Agent for BUILT FRESH FLORIDA, LLC

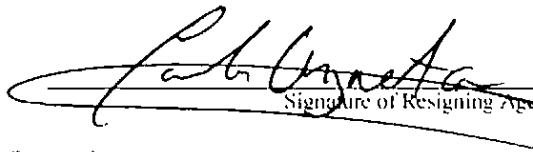
Name of Limited Liability Company

L22000318789

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:

Carlos Unzueta

Typed or Printed Name

Manager

Capacity

FILED
24 JUN 13 AM 5:21
CLERK OF THE COURT
JULIA A. SMITH, CLERK
TALLAHASSEE, FLORIDA

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