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(City/State/Zip/Phone #)

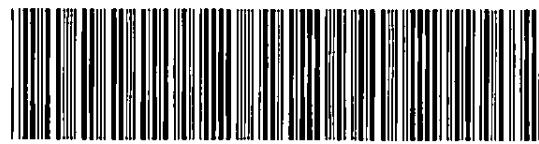
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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Eve Baker Real-Estate, LLC  
**DOCUMENT NUMBER:** Name of Limited Liability Company  
1.23000145790

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:

Eve Baker

Name of Person

Eve Baker Real-Estate, LLC

Name of Firm/Company

1336 Beach Ave

Address

Atlantic Beach, Fla. 32233

City/State and Zip Code

evebkr@comcast.net

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

For further information concerning this matter, please call:

Eve Baker 904 635-1422  
Name of Person at ( 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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,

Cheyenne Moseley, Legal Zoom.com, INC. \_\_\_\_\_, hereby resigns as

Name of Registered Agent

Registered Agent for Eve Baker Real-Estate, LLC

Name of Limited Liability Company

L23000145790

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:

Cheyenne Moseley, Legal Zoom.com, INC. \_\_\_\_\_

Typed or Printed Name

Registered Agent

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