

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : SILBERSTEIN LAW FIRM PLLC
Account Number : I20110000094
Phone : (941) 953-4400
Fax Number : (941) 953-4450

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**LLC REGISTERED AGENT RESIGNATION
AVALON FLOORING, L.L.C.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

RECEIVED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

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Help AUG 23 2013

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Avalon Flooring, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L99000001063

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:

David M. Silberstein, Esq.

Name of Person

Silberstein Law Firm, PLLC

Name of Firm/Company

P.O. Box 2342

Address

Sarasota, FL 34230

City/State and Zip Code

david@silbersteinlawfirm.com

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

For further information concerning this matter, please call:

David Silberstein

Name of Person

at (941) 953-4400

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

2013 AUG 22 AM 8:25
REG. SEC. OF STATE
TALLAHASSEE, FLORIDA

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

David M. Silberstein

Name of Registered Agent

, hereby resigns as

Registered Agent for **Avalon Flooring, L.L.C.**

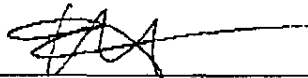
Name of Limited Liability Company

L99000001063

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:

Typed or Printed Name

Capacity

FILED
2013 AUG 22 AM 8:25
REG. DIV. OF STATE
CORP. DIV. OF 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

INHS17 (08/05)

H130001873203