

M 00000000997

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

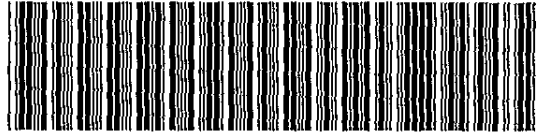
(Business Entity Name)

(Document Number)

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04/29/05-01014--016 **85.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5/25
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sunset Bistro, LLC

(Name of Limited Liability Company)

DOCUMENT NUMBER: M00000000997

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:

John V. Robinson, Esquire

(Name of Person)

Robinson & Gerson, P.C.

(Name of Firm/Company)

7102 Three Chopt Road

(Address)

Richmond, VA 23226

(City/State and Zip Code)

For further information concerning this matter, please call:

John V. Robinson, Esq.

(Name of Person)

at (804) 282-2987

(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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 9, 2005

JOHN D. HATCH, P.C.
840 SE 5TH STREET
OCALA, FL 34471

SUBJECT: SUNSET BISTRO, LLC
Ref. Number: M00000000997

We have received your document for SUNSET BISTRO, LLC and check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Our records show Marie Demachy as the registered agent.

Please return 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) 245-6908.

Anna Chesnut
Document Specialist

Letter Number: 605A00032985

JOHN D. HATCH, P.C.
A PROFESSIONAL CORPORATION
COUNSELOR AT LAW

840 S.E. 5TH STREET
OCALA, FLORIDA 34471

TELEPHONE: (352) 690-6270
FACSIMILE: (352) 690-6272

May 23, 2005

Florida Secretary of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Attention: Anna Chesnut

Re: SUNSET BISTRO, LLC - Resignation of Registered Agent for a Limited Liability Company

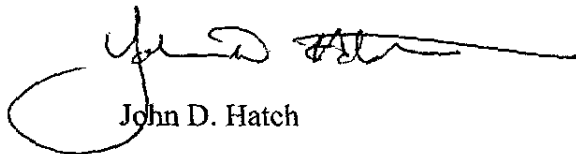
Dear Ms. Chestnut:

As we discussed, I am returning my Resignation as Registered Agent for Sunset Bistro, LLC in order to obtain a formal paper trail of the resignation.. I understand you are holding our check for \$85.00 payable to the **Florida Dept/ of State** to cover the filing fee.

If you require anything additional, please let me know.

Thanking you for your assistance, I am,

Respectfully,



John D. Hatch

JDH:pc

JOHN D. HATCH, P.C.
A PROFESSIONAL CORPORATION
COUNSELOR AT LAW

840 S.E. 5TH STREET
OCALA, FLORIDA 34471

TELEPHONE: (352) 690-6270
FACSIMILE: (352) 690-6272

April 28, 2005

Florida Secretary of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: SUNSET BISTRO, LLC – Resignation of Registered Agent for a Limited Liability Company

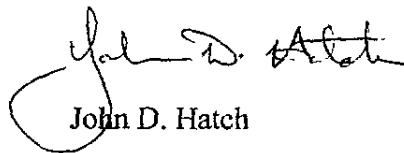
Dear Sir or Madam:

Enclosed please find my Resignation as Registered Agent for Sunset Bistro, LLC. Enclosed is our check for \$85.00 payable to the **Florida Dept/ of State** to cover the filing fee.

If you require anything additional, please let me know.

Thanking you for your assistance, I am,

Respectfully,


John D. Hatch

JDH:pc

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

John D. Hatch, Esquire

(Name of Registered Agent)

, hereby resigns as

Registered Agent for Sunset Bistro, LLC


(Name of Limited Liability Company)

M00000000997

(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)

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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TALLAHASSEE, FLORIDA
SECRETARY OF STATE