

From:

m04000005351

11/07/2014 09:28

#182 P.007/039

Division of Corporations

Page 1 of 1

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000260071 3)))



H140002600713ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (800)221-2972  
Fax Number : (888)692-9256

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

Email Address:

FILED  
2014 NOV -7 AM 11:46  
STATE OF FLORIDA  
TALLAHASSEE

LLC REGISTERED AGENT RESIGNATION  
CITTADINI LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED  
14 NOV -7 AM 11:54  
DIVISION OF CORPORATIONS  
TALLAHASSEE  
FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

11/10/14

From:

11/07/2014 09:28

#182 P.008/039

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CITTADINI LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** M04000005351

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:

Carol Panchana  
Name of Person

BlumbergExcelsior Corporate Services Inc.  
Name of Firm/Company

16 Court St 14th FL  
Address

Brooklyn, NY 11241  
City/State and Zip Code

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

For further information concerning this matter, please call:

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

From:

11/07/2014 09:29

#182 P.009/039

FILED  
2014 NOV -7 AM 11:46  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**STATEMENT OF RESIGNATION OF REGISTERED AGENT  
FOR A LIMITED LIABILITY COMPANY**

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,  
BLUMBERGEXCELSIOR CORPORATE SERVICES, INC., hereby resigns as

Name of Registered Agent

Registered Agent for CITTADINI LLC

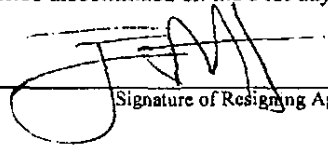
Name of Limited Liability Company

M04000005351

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:

Jose Mojica

Typed or Printed Name

Assistant Secretary

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