MO5000005046

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EXAMINER

COVER LETTER

SUBJECT: PINE ISLAND LLC		
(Name of Limited Liability Company) DOCUMENT NUMBER: M0500005046		
DOCUMENT NUMBER:		
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee ar for filing.	re submitted	
Please return all correspondence concerning this matter to the following:		
MARY FINK		
(Name of Person)		
NATIONAL CORPORATE RESEARCH, LTD (Name of Firm/Company)		
615 S. Dupont Highway	.	
(Address)	132 B	
DOVER, DE 19901 (City/State and Zip Code) For further information concerning this matter, please call:	P-B	epriler Linear
	골/ 후 1	,
MARY FINK at (800) 483-1140	AMIL: OF	
(Name of Person) (Area Code & Daytime Telephone Number)),tur	

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

Amendment Section Division of Corporations

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

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,
NATIONAL CODDODATE DESEADOU LED
, neledy lesigns as
(Name of Registered Agent)
Registered Agent for PINE ISLAND LLC
(Name of Limited Liability Company)
M0500005046
(Document Number, if known)
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)
f signing on behalf of an entity:
Wayne Rafanelli
(Typed or Printed Name)
VP, National Corporate Research, LTD
VP, National Corporate Research, LTD 学のでは (Capacity) には は と
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[7] T
FILING FEES:
FILING FEES: \$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/voluntarily dissolved/

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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