

MO760003641

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 : INCORPORATING SERVICES FL
Account Number : I20050000052
Phone : (302) 531-0855
Fax Number : (850) 656-7953

FILED
2013 AUG 28 AM 10:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

RECEIVED
13 AUG 29 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC REGISTERED AGENT RESIGNATION
SMARTRESORT CO., LLC**

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

AUG 30 2013

D. BRUCE

28th

Electronic Filing Menu

Corporate Filing Menu

Help



August 29, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SMARTRESORT CO., LLC
3540 CENTERVIEW DRIVE
SUITE 200
RALEIGH, NC 27606

SUBJECT: SMARTRESORT CO., LLC
REF: M07000003641

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Need signature of the Resigning 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) 245-6051.

Deborah Bruce
Regulatory Specialist II

FAX Aud. #: H13000191513
Letter Number: 913A00020544

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SMARTRESORT CO., LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: M07000003641

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:

PHYLLIS D. BROWN
(Name of Person)

INCORPORATING SERVICES, LTD.
(Name of Firm/Company)

3500 S DUPONT HWY
(Address)

DOVER, DELAWARE 19901
(City/State and Zip Code)

For further information concerning this matter, please call:

PHYLLIS D. BROWN at (302) 531-0855
(Name of Person) (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

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TALLAHASSEE FLORIDA

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**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,

INCORPORATING SERVICES, LTD.

(Name of Registered Agent)

, hereby resigns as

Registered Agent for SMARTRESORT CO., LLC

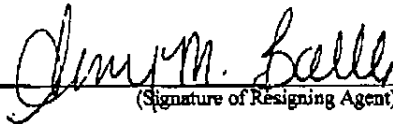
(Name of Limited Liability Company)

M07000003641

(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:

AMY M. BALKE

(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

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