M0900000019

(Re	questor's Name)	
	dress)	
(AO	aress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

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SUBJECT:	GAETANO CACCIATORE LLC
•	Name of Limited Liability Company
DOCUMENT NUMBER:	M0900000019
The enclosed Resignation of R for filing.	egistered Agent for a Limited Liability Company and fee are submitted
Please return all correspondence	e concerning this matter to the following:
Brooke B	reeding
Name of	Person
National Corporate	e Research, Ltd.
Name of Firm	n/Company
615 S Dup	
Addr	ess .
Dover, DE	E 19901
City/State and	d Zip Code
statrep@natio	nalcorp.com
E-mail address: (to be used for	future annual report notification)
For further information concern	ning this matter, please call:
Brooke Breeding	
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of sect	tion 608.416(2) or 608.509, Florida Statutes, the undersigned,	5/0
National Corpo	orate Research, Ltd. , hereby resigns as	
	Registered Agent	
Registered Agent for	GAETANO CACCIATORE LLC	3
	Name of Limited Liability Company	<u>.</u>
M0900000001	19	
Document Number, if ke	nown	
-	nailed to the above listed limited liability company at its last known address office discontinued on the 31st day after the date on which this statement	
	Signature of Resigning Agent	
If signing on behalf of an entity:		
	Andrew Lundgren Typed or Printed Name	
V.	P., National Corporate Research, Ltd. Capacity	

FILING FEES: \$ 85.00 Active

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company \$ 25.00

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314