

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.

(((H14000169385 3)))



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

: INCORPORATING SERVICES FL

Account Number : 120050000052 Phone

: (850)656-7956

radmun x&3

: (850)656-7953

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

LLC REGISTERED AGENT RESIGNATION MORGAN OCEAN SUNRISE LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

JUL 1 7 2014

7/16/2014

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT: MORGAN OCEAN SUNRISE		·
		imited Liability	Company
DOC	UMENT NUMBER: M09000002416		
The exfor fill	nclosed Resignation of Registered Agen ing.	t for a Limited	Liability Company and fee are submitted
Please	return all correspondence concerning the	his matter to th	ne following:
Edle	Whitebread		
	Name of Person	· · · · · · · · · · · · · · · · · · ·	
Incor	porating Services, Ltd.		
	Name of Firm/Company	·	
3500	South DuPont Highway		
	Address		,
Dove	r, DE 19901		
	City/State and Zip Code		
E	mail address: (to be used for fluture annual repo	nt notification)	
For fu	rther information concerning this matter	r, please call:	
Edie '	Whitebread	302	531-0855
	Name of Person	Area Code	Daytime Telephone Number
Enclos liabili liabili	sed is a check made payable to the Floric y company or \$25,00 for an administrat y company.	da Department ively dissolve	t of State for \$85.00 for an active limited d, voluntarily dissolved or withdrawn limited

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

" INHS17 (2/14)

INHS17 (2/14)

(((%14000169385 3)))

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

INCORPORATING SERVICES, LTD	, hereby resigns as	
Name of Registered Ages	DI .	
Registered Agent for MORGAN OCEAN	SUNRISE LLC	
Name of Lim	ited Liability Company	- •
M09000002418		
Document Number, if known		
A copy of this resignation was mailed to the a	bove listed limited liability company at its last know	n address.
If signing on behalf of an entity: Army Balke	ntinued on the 31st day after the date on which this s	
	yped or Printed Name	
Assistant Secret	ary	
	Capacity	TALLORE TALLORE
FTLING \$ 85.00 \$ 25.00	FEES: Active limited liability company Administratively dissolved/voluntarily dissolved/ withdrawn limited liability company	MARY DE STATE ASSET TO SHE 16 PM 1:20
Make cheeks payab	le to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallabassee, FL 32314	O TON