# M16000008191

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### Resignation of Registered Agent for a Foreign Limited Liability Company

Capitol Corporate Services, Inc.

PO Box 1831 Austin, TX 78767

Phone, 800-345-4647 Fax, 800-432-3622

regagent@capitolservices.com

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 DATE: STATE: 1/31/2018 FLORIDA

REP UNIT:

DIRT SOUTH FLORIDA

COMMISSARY, LLC

Enclosed for filing please find a Resignation of Registered Agent for a Foreign Limited Liability Company for the above referenced name, which is to be filed in your office. Enclosed is check # 29787 in the amount of 25.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call 800-345-4647 and ask for the Registered Agent Department.

Please return file-stamped copy to the following address:

Capitol Corporate Services, Inc. PO Box 1831 Austin, TX 78767

#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: DIRT SOUTH FLORIDA COMMISSARY, LLC
Name of Limited Liability Company
DOCUMENT NUMBER: M16000008191
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:
Rhonda Peirce Name of Person
Capitol Corporate Services, Inc. (Registered Agent Dept.)  Name of Firm/Company
PO Box 1831 Address
Austin, TX 78767  City/State and Zip Code
rpeirce@capitolservices.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rhonda Peirce at ( 800 ) 345-4647 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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

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

Pursuant to the provisions of	of section 605.0115, Florida Statutes, the undersigned,
Capitol C	orporate Services, Inc. , hereby resigns as
Na ————————————————————————————————————	me of Registered Agent
Registered Agent for	Orporate Services, Inc. , hereby resigns as me of Registered Agent  DIRT SOUTH FLORIDA COMMISSARY, LLC
	Name of the Limited Liability Company
M160000 Document Number	
A copy of this resignation v	was mailed to the above listed limited liability company at its last known address.
The agency is terminated ar	nd 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 er	ntity:
_	Jason Fischer 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