

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #	)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: M&M GRILL	& BAR, INC. (Name of Corporation)
DOCUMENT NUMBER:	
The enclosed Resignation of Register	red Agent for a Corporation and fee are submitted for filing.
Please return all correspondence con	cerning this matter to the following:
CAROL A. MACON	
(Name of Perso	n)
(Name of Firm/Con	
23201 SHADY OAK	LANE
(Address)	
ESTERO, FLORIDA	
For further information concerning the	,
CAROL A. MACON	, 239  777-1007
(Name of Person)	at (239)777-1007 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to or \$35.00 for an administratively disa	the Florida Department of State for \$87.50 for an active corporation solved, voluntarily dissolved or withdrawn corporation.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  Florida Statutes, the undersigned, CAROL A. MACONI  (Name of Registered Agent)
hereby resigns as Registered Agent for M&M GRILL AND BAR, INC.  (Name of Corporation)
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation 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:
(Typed or Printed Name)
(Capacity)
Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation
\$87.50 - Active Corporation \$35.00 - 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