

L13000015193

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

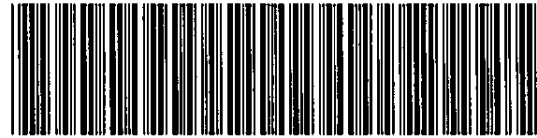
L13-15193

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** WillonFile.com Document Company, LLC  
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

**Brian K. Martin**

(Contact Person)

**WillonFile.com Document Company, LLC**

(Firm/Company)

**799 Eagle Cove Drive**

(Address)

**Fleming Island, FL 32003**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Ms. Rakiyah Cook, CEO** at **904** **624-6549**

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

\$25 Filing Fee

\$55 Filing Fee &  
Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 11, 2014

BRIAN K. MARTIN  
799 EAGLE COVE DRIVE  
FLEMING ISLAND, FL 32003

SUBJECT: WILLONFILE.COM DOCUMENT COMPANY, LLC  
Ref. Number: L13000015193

We have received your document for WILLONFILE.COM DOCUMENT COMPANY, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$55.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

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.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 214A00005265



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2014 APR 22 PM 4:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER  
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: WILLONFILE.COM DOCUMENT COMPANY, LLC

2. This limited liability company was organized under the laws of:

Section 15.16, Florida Statute Authentication Code: 130130092054-300244139213#1

3. The Florida document/registration number of this limited liability company is:

L13000015193

4. I, Brian K. Martin, hereby resign as a Managing Member  
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Brian K. Martin 7 March 2014  
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)