

L00000005741

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan AUG 30 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: North Coast Technologies, L.L.C
Name of Limited Liability Company

DOCUMENT NUMBER: L00000006741

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:

Michael J Kenny
Name of Person

North Coast Technologies L.L.C.
Name of Firm/Company

195 Lexington Road
Address

Concord, MA 01742
City/State and Zip Code

mkckmkmjk@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael J Kenny at (978) 697-6523
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Carol Ann Kaminski

, hereby resigns as

Name of Registered Agent

Registered Agent for North Coast Technologies, L.L.C.

Name of Limited Liability Company

L00000005741

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company 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.

Carol Ann Kaminski

Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

FILED
10 AUG 27 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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withdrawn limited liability company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