

L01000008555

Return for Name
Address
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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-08/08/02--01003--002
*****35.00 *****35.00

CF-35.00

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

| NEW FILINGS | |
|-------------|-------------------|
| | Profit |
| | NonProfit |
| | Limited Liability |
| | Domestication |
| | Other |

| AMENDMENTS | |
|------------|--|
| | Amendment |
| | Resignation of R.A., Officer/ Director |
| | Change of Registered Agent |
| | Dissolution/Withdrawal |
| | Merger |

| OTHER FILINGS | |
|---------------|------------------|
| | Annual Report |
| | Fictitious Name |
| | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|--------------------------------|---------------------|
| | Foreign |
| | Limited Partnership |
| | Reinstatement* |
| | Trademark |
| | Other |

BK

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02 AUG -7 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 29, 2002

COMMERCIAL BUSINESS CREDIT L.L.C.
2727 ULMERTON ROAD, SUITE 350
CLEARWATER, FL 33762

SUBJECT: COMMERCIAL BUSINESS CREDIT, L.L.C.
Ref. Number: L01000008555

We have received your document for COMMERCIAL BUSINESS CREDIT, L.L.C. and check(s) totaling \$35.00. However, your check(s) and document are being returned for the following:

You have used a form that is only used for CORPORATIONS. Please complete and sign and return the enclosed LIMITED LIABILITY COMPANY form that is used for resignations of members, managing members, or managers.

Also, please note that the fee to file the LLC form is only \$25.00.

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) 245-6914.

Buck Kohr
Corporate Specialist

Letter Number: 902A00045561

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Tracy Byrnes, hereby resign as Managing Member
(Title)
of Commercial Business Credit LLC,
(Limited Liability Company)

a limited liability company organized under the laws of the State of Florida,

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

Tracy Byrnes

(Signature of resigning manager, managing member or member)

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA