10200013717

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SECRETARY OF STATE SHALL SECRETARY OF STATE AND A SEE, FLORIDA

M. THOMAS

NOV 2 0 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Teleguick Systems, LLC Name of Limited Liability Company DOCUMENT NUMBER: LO200013717
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:
By on Wolf Name of Person
Teleguick Syptems, LLC Name of Firm/Company FE 3 7
8751 Ulmerton Rd Address
Teleguick Syptems, LLC Name of Firm/Company 8751 Ulmenton RA Address Largo FL 33771 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Bryson Wolf at (727) 342-5910 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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, F	lorida Statutes, the undersigned,
Mlgan Schutz OName of Registered Agent	, hereby resigns as
UName of Registered Agent	·
Registered Agent for Telquick Systems	
Name of Limited Liability Comp	pany
L02000013717	
Document Number, if known	•
A copy of this resignation was mailed to the above listed limit	
The agency is terminated and the office discontinued on the 31	st day after the date on which this statement is filed.
Megan ASchul Signature of Resig	TARY OF STATE ASSEE, FLORID
If signing on behalf of an entity:	PATE ORIO
Typed or Printed Nan	ne
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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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