

L03000006573

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DIVISION OF CORPORATION  
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C. LEWIS

JUL 17 2014

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Malone Consulting Group, LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L0300006573

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:

Tommy Malone  
Name of Person

Malone Consulting Group, LLC  
Name of Firm/Company

4780 Ashford Dunwoody Rd, Suite A-229  
Address

Atlanta, GA. 30338  
City/State and Zip Code

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

For further information concerning this matter, please call:

Tommy Malone at ( 404 ) 704-0980  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF RESIGNATION OF REGISTERED AGENT  
FOR A LIMITED LIABILITY COMPANY**

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Michael Tringali, hereby resigns as  
Name of Registered Agent

Registered Agent for Malone Consulting Group, LLC

Name of Limited Liability Company

L03000006573

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.

Michael Tringali

Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

14 JUL - 1 PM 2:49  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**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withdrawn limited liability company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**