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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 21, 2003

EROL PALANTEKIN 18408 CANARY LANE LUTZ, FL 33558

SUBJECT: THE MOTHERLOAD LLC

Ref. Number: L03000027869

We have received your document for THE MOTHERLOAD LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6916.

Letter Number: 503A00063305

Carol Mustain Document Specialist

TRANSMITTAL LETTER

SUBJECT: THE MOTHERLOAD LLC (Name of Corporation) DOCUMENT NUMBER: L03000027869 The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing Please return all correspondence concerning this matter to the following: Erol N Palantekin (Name of Person) (Name of Firm/Company) 18408 CANARY LANE (Address) Lutz FL 33558 (Cit//State and Zip/Code) For further information concerning this matter, please call: BARRY, BARBARA D (Name of Person) At (Area Code & Daytime Telephone Number) Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation. Mailing Address: Amendment Section Division of Corporations 20.0 Box 6327 Fallahassee, FL 32314	Amendment Section Division of Corporations	
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	Amendment Section Division of Corporations P.O. Box 6327	Amendment Section Division of Corporations 409 E. Gaines Street

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ions of section 6	08,416(2) or 6	508.509, Florida	a Statutes, the unde	ersigned,		
EROL N PALAN	N PALANTEKIN, hereby resigns as						
	(Name of Regist	ered Agent)		,,,			
Registered Agent for	THE MOTH	ERLOAD LI	LC _				
							, , , , , , , , , , , , , , , , , , ,
	(Nan	ne of Limited Lis	ability Company)				
L03000027869		· ·			· 		
(Document No	umber, if known)				•		
A copy of this resigna	tion was mailed	to the above l	isted limited lia	bility company at i	its last known add	ress.	
The agency is termina	ted and the offic	e discontinue	d on the 31st da	y after the date on	which this statem	ent is	filed.
	_ &h	IN.	Pali		<u>-</u>		
		(Signature of	Resigning Agent)		≥		
If signing on behalf of	fan entity:	t			LC A	O3 NOV	-
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Active limited liability company
Administratively dissolved/voluntarily dissolved/
withdrawn limited liability company \$ 85,00 \$ 25,00

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