

L03000041850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

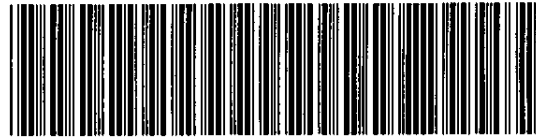
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/11/08--01002--016 **25.00

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DIVISION OF CORPORATIONS
08 APR 11 PM 4:13

J. BRYAN

APR 14 2008

EXAMINER

Consumer Title Services, LLC

**939 N. University Drive
Coral Springs, Florida 33071**

Telephone: (954) 369-0166

Facsimile: (954) 369-0160

April 9, 2008

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

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RE: CHANGE OF REGISTERED OFFICE AND AGENT FOR LIMITED LIABILITY COMPANY

To Whom It May Concern:

Kindly enclosed please find the cover letter, our check in the amount of \$25 for the filing fee, Resignation of member, managing member or manager from LLC and the statement of change of registered office and agent for LLC.

I have also included my driver's license and Title Agent License for the change of the LLC from an attorney to a licensed title agent.

Please send all questions or correspondence to our address above or the numbers above and we will get all necessary paperwork over to Mr. Ponnock for his records.

Thank you for time and assistance.

Cordially,



Dawn Marie Andrie
Licensee for Consumer Title Services, LLC
DawnCTS@comcast.net

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Consumer Title Services, LLC
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Andrew Ponnock
(Contact Person)

Law Offices of Andrew Ponnock
(Firm/Company)

10101 West Sample Road
(Address)

Coral Springs, Florida 33065
(City/State and Zip Code)

For further information concerning this matter, please call:

Andrew Ponnock at (954) 340-4051
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

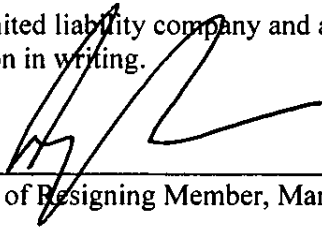
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Consumer Title Services, LLC

2. This limited liability company was organized under the laws of:
Florida

3. The Florida document/registration number of this limited liability company is:
L03000041850

4. I, Andrew Ponnock, hereby resign as a Managing member
(Print Name of Person Resigning) (Print Title)

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



Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

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