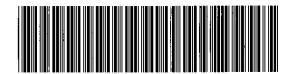
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K. SALY EXAMINER

JUL 7 2011

COVER LETTER

SUBJECT: Foundit, L.L.C. Name of Limited Liability Company
DOCUMENT NUMBER: L03000044156
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:
Felicia Henderson Name of Person
Matthews Jones & Hawkins, LLP Name of Firm/Company
4475 Legendary Drive Address
Destin, Florida 32541 City/State and Zip Code
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Felicia Henderson at (850) 837-3662 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

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 provision	ons of section 608.416(2) or 608.509	9, Florida Statutes, the undersigned,	
	Dana C. Matthews	, hereby resigns as	,
•	Name of Registered Agent	,	AND THE RESERVE TO TH
Registered Agent for _	Fo	oundit, L.L.C.	
	Name of Limited Liability Co	ompany	The state of the s
	00044156 Jumber, if known		Call A
A copy of this resignati	ion was mailed to the above listed lin	mited liability company at its last kn	own address.
The agency is terminate	ed and the office discontinued on the	e 31st day after the date on which the	is statement is filed.
	Signature of R	esigning Agent	
If signing on behalf of	an entity:		
	Typed or Printed 1	Name	
	Capacity	· <u>·</u>	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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