L04000003531

(F	Requestor's Name)
(/	Address)
(A	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
J)	Document Number)
Certified Copies	Certificates of Status
Special Instructions	o Filing Officer:
//	Office Use Only



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DEPARTMENT OF STATE DIVISION OF CORPORATIONS

S TALLAHASSEE, FLOR

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UCC FILING & SEARCH SERVICES, INC. 1574 Village Square Blvd Ste 100 Tallahassee, Florida 32309 (850) 681-6528 P

HOLD FOR PICKUP BY UCC SERVICES OFFICE USE ONLY

FILING & SEARCH		December 14, 2006
SERVICES	CO	DRPORATION NAME (S) AND DOCUMENT NUMBER (S)
Te		ading LLC
		10000000000000000000000000000000000000
Filing Evidence ☑ Plain/Confirmation (Сору	Type of Document □ Certificate of Status
□ Certified Copy		☐ Certificate of Good Standing
		□ Articles Only
Retrieval Request Photocopy		 All Charter Documents to Include Articles & Amendments Fictitious Name Certificate
□ Certified Copy		□ Other
NEW FILINGS		AMENDMENTS
Profit		Amendment
Non Profit	X	Resignation of RA Officer/Director
Limited Liability		Change of Registered Agent
Domestication		Dissolution/Withdrawal
Other		Merger
OTHER FILINGS		REGISTRATION/QUALIFICATION
Annual Reports		Foreign
Fictitious Name		Limited Liability
Name Reservation		Reinstatement
Reinstatement		Trademark
		Other

•		
RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned, UCC FILING & SEARCH SERVICES, INC.		
Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,		
UCC FILING & SEARCH SERVICES, INC. , hereby resigns as		
(Name of Registered Agent)		
Registered Agent for TEMPLE TRADING LLC		
(Name of Limited Liability Company)		
L0400003531		
(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.		
(Signature of Resigning Agent)		
If signing on behalf of an entity:		
EDWARD HAND		
(Typed or Printed Name)		
PRESIDENT		
(Capacity)		

FILING FEES: \$ 85.00 Activ \$ 25.00 Admi Active limited liability company
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withdrawn limited liability company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