# L04000067485

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SEP 2 8 2012

T. HAMPTON

### **COVER LETTER**

SUBJECT: OF Source International UC  Name of Limited Liability Company
DOCUMENT NUMBER: 12000016874
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:
Pan Valladaa
Creveral Hudomotive Company  Name of Firm/Company
7803 Southland Blud Stc 203
Orlando G 32809  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at ()  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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

**TO:** Amendment Section Division of Corporations

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



#### RECEIVED

12 SEP 27 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

L

DAN VALLADAO GENERAL AUTOMOTIVE COMPANY 7803 SOUTHLAND BLVD - STE 203 ORLANDO, FL 32809

SUBJECT: OE SOURCE, L.C. Ref. Number: L04000067485

September 18, 2012

We have received your document for OE SOURCE, L.C. and your check(s) totaling \$385.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of 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) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 012A00023438

## 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,
Shawn Powell Joseph, hereby resigns as
Name of Registered Agent *
Registered Agent for
Name of Limited Liability Company
L040000 67485
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:
Typed or Printed Name
Capacity

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