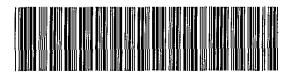
L04000071000

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Business Entity Name)
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(Document Number)
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Special Instructions to Filing Officer:
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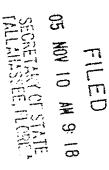
Office Use Only



300061200153

AA Resign

11/10/05--01039--013 **195.00



94, 1600

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Thage Development Group LLC (Name of Limited Liability Company) DOCUMENT NUMBER: L04000071000
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:
Richard C. Parker (Name of Person)
Image Development Group, LLC (Name of Firm/Company)
Post Office Box 305
Newberry Horida 32669 (City/State and Zip Code)
For further information concerning this matter, please call:
Richard C. Parker at (352) 316-0454 (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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

LIABILITY COMPANY							
Pursuant to the provision	ons of section 608.416	6(2) or 608.509, I	Florida Statutes, t	he undersigned,		罪	
Robert	Clark		, here	eby resigns as	110		
Registered Agent for _	Name of Registered Ag		op ment		LLC		
	(Name of Li	imited Liability Com	ipany)	_ 		,	
LOHO000 (Document Num	71000 nber, if known)						
A copy of this resignati	on was mailed to the	above listed limi	ted liability comp	any at its last kr	nown address.		
The agency is terminate	all of	ontinued on the 3	-	date on which th	is statement is	filed.	
If signing on behalf of a	Robert (Cark (Typed or Printed Na	me)	<u></u> .			
		(Capacity)					

RESIGNATION OF REGISTERED AGENT FOR A LIMITED &

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

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company