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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(e.t.) state Liph Helle H)
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(Document Number)
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SEGRETARY OF STATE
TAIL AHASSEE, FLORIDA

D. BRUCE

APR 21 2008

EXAMINER

COVER LETTER

	:
SUBJECT: Cascent Auto Sales LLC (Name of Limited Liability Company)	
DOCUMENT NUMBER: 105000 14548	
The enclosed Resignation of Registered Agent for a Limited Liability Company a for filing.	and fee are submitted
Please return all correspondence concerning this matter to the following:	
Name of Person)	TALL
Crescent Auto Sales, LLC (Name of Firm/Company)	APR 21 P
Po 130 x 46862 (Address)	PH 12: 57
Tumpa FL 336A7 (City/State and Zip Code)	A
For further information concerning this matter, please call:	
Name of Person) at (Marea Code & Daytime Telephone	$\frac{\partial}{\partial \mathcal{L}}$
Enclosed is a check made payable to the Florida Department of State for \$85.00 for liability company or \$25.00 for an administratively dissolved, voluntarily dissolved limited liability company.	or an active limited ed or withdrawn

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 9, 2008

LUSCEN SAINTIL PO BOX 46862 TAMPA, FL 33646

SUBJECT: CRESCENT AUTO SALES, LLC

Ref. Number: L05000014548

SEGRETARY OF STATE

We have received your document for CRESCENT AUTO SALES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return 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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 708A00020893

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 608.416(2) or 608.	509, Florida Statut	tes, the undersigned,	,
Jucsen	Saintil		, hereby resigns as	
•	(Name of Registered Agent)	_		
Registered Agent for	crescent	Auto	Sales.	LLC
	(Name of Limited Liabili	ty Company)		,
LOSDOO (Document Number	- 1-1-1-1			
A copy of this resignatio	n was mailed to the above listed	I limited liability c	ompany at its last k	nown address.
The agency is terminated	and the office discontinued on	the 31st day after	the date on which th	nis statement is filed.
		/		
	(Signature o	of Resigning Agent)		v 0
If signing on behalf of ar	entity:		LLAH	OS APR 2
	(Typed or Prin	stad Nama)		2
	(Typed of Fin	ned Maine)	ří-	
	(Capacity	·)		- 15 - F

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