

L05000103787

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(Address)

(Address)

(City/State/Zip/Phone #)



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2006 APR 26 AM 8:00  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

*G. A. Rescigno*

G. Ouellette MAY 04 2006

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dramatic Detail LLC  
(Name of Limited Liability Company)

**DOCUMENT NUMBER:** LOS000103787

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:

Amy Van Fossen  
(Name of Person)

Amy B Van Fossen PA  
(Name of Firm/Company)

476 Hwy A1A Suite 3A  
(Address)

Satellite Beach, FL 32937  
(City/State and Zip Code)

For further information concerning this matter, please call:

Amy Van Fossen at (321) 735-225  
(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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

## 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,

Amy B Van Tossen PA, hereby resigns as  
(Name of Registered Agent)

Registered Agent for Dramatic Detail, LLC  
(Name of Limited Liability Company)

LOS000103787  
(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.

Amy B Van Tossen PA  
(Signature of Resigning Agent)

If signing on behalf of an entity:

Amy Van Tossen  
(Typed or Printed Name)  
Pres  
(Capacity)

FILED  
2006 APR 26 AM 8:00  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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