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SECRETARY OF STATE

J. SAULSBERRY EXAMINER MAY 25 2012

### **COVER LETTER**

Registration Section TO: Division of Corporations Jeraline Sauls be

Registration Section **Division of Corporations** 

Tallahassee, Florida 323

P.O. Box 6327

SUBJECT: Talquin Graphics, LLC (Name of Limited Liability Company) The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Paul Field (Contact Person) Talquin Graphics, LLC (Firm/Company) 1908 Myrick Road (Address) Tallahassee, FL 32303 (City/State and Zip Code) For further information concerning this matter, please call: Paul Field (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: \$55 Filing Fee & \$25 Filing Fee Certified Copy MAILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

CR2E079 (5/06)

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER' FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

of State is: Te	limited liability companiquin Graphics, LL	ny as it appears on the records of the Florida Department  C	
2. This limited liab	ility company was organ	anized under the laws of:	
3. The Florida doci L06000013		ber of this limited liability company is:	
of this limited lia resignation in wr	bility company and affiriting.	ment the limited liability company has been notified of my ling Member or Manager	<b>~</b>
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	Paid on 12/22 See Copy of Check on 3rd page	