

L06 0000 65488

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

MAY 19 2011

EXAMINER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Brooks Brothers, LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L06000065488

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:

Tina L Sealey  
Name of Person

Brooks Brothers, LLC  
Name of Firm/Company

1551 BLOOMINGDALE ROAD  
Address

Jacksonville, FL 32222  
City/State and Zip Code

tsealey@parcmanagement.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tina L Sealey at ( 904 ) 708.8957  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**FILED**  
2011 MAY 18 AM 10:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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,

TINA L SEALEY

Name of Registered Agent

, hereby resigns as

Registered Agent for BROOKS BROTHERS, LLC

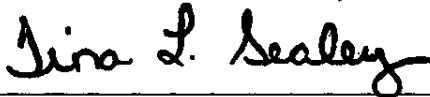
Name of Limited Liability Company

L06000065488

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:

Tina L Sealey

Typed or Printed Name

Registered Agent

Capacity

FILED  
2011 MAY 18 AM 10:56  
SECRETARY 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