

LD6000067481

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

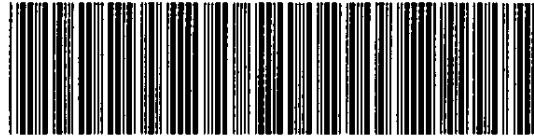
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/06/10--01022--009 **35.00

FILED
2010 APR -6 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

APR 7 2010

EXAMINER

BAYER LAW OFFICE
109 South 6th Street
Flagler Beach, FL 32136
Telephone: 386-439-2332
Fax: 386-439-6522

April 1, 2010

Amendment Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Independent Drywall Distributors, LLC
Resignation of Registered Agent

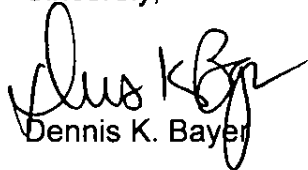
Dear Sir or Madam:

The enclosed Resignation of Registered Agent for Independent Drywall Distributors, LLC is submitted for filing. Also enclosed is my check in the amount of \$35.00 for filing this document involving an administratively dissolved corporation.

Please contact me if you require anything further.

Thank you.

Sincerely,


Dennis K. Bayer

DKB:sk
Enc.

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,

DENNIS K. BAYER, ESQ.

Name of Registered Agent

, hereby resigns as

Registered Agent for INDEPENDENT DRYWALL DISTRIBUTORS, LLC

L06000067481

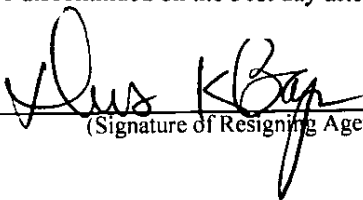
Name of Limited Liability Company

L06000067481

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:

Typed or Printed Name

Capacity

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

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