

LD00000073024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

Cystal Marshall
advised to File
Resignation of RA.
1.25.08

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JAN 14 PM 2:33

RA/Res
@ 1/25/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Transison LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: _____

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:

Jay Marshall
(Name of Person)

(Name of Firm/Company)

18441 Hardrock Rd.
(Address)

Brooksville, FL 34601
(City/State and Zip Code)

For further information concerning this matter, please call:

Crystal Marshall at (352) 279 2488
(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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 17, 2008

JAY MARSHALL
18441 HARD ROCK ROAD
BROOKSVILLE, FL 34601

SUBJECT: TRAN SIGN, LLC
Ref. Number: L06000073024

We have received your document for TRAN SIGN, LLC. However, the document has not been filed and is being returned for the following:

Registered Agent information was changed on the reinstatement filed on January 11, 2008.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 108A00003830

*Crystal Marshall
advised to File
Resignation Anyway!
(1a) 1/22/08*

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,

JAY MARSHALL, hereby resigns as
(Name of Registered Agent)

Registered Agent for TransSign LLC
(Name of Limited Liability Company)

(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.

Jay W. Marshall
(Signature of Resigning Agent)

If signing on behalf of an entity:

JAY W MARSHALL
(Typed or Printed Name)
Manager Member
(Capacity)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JAN 14 PM 2:33

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