

LO700007334

Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : AIA REGISTERED AGENT INC.
Account Number : 1200900000032
Phone : (866) 703-8828
Fax Number : (561) 202-8082

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**LLC REGISTERED AGENT RESIGNATION
TSC SOUTHEAST, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$85.00

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**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,

A1A REGISTERED AGENT INC., hereby resigns as
Name of Registered Agent

Registered Agent for TSC SOUTHEAST, LLC

Name of Limited Liability Company

L07000007334

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.

Tina Maki
Signature of Resigning Agent

If signing on behalf of an entity:

TINA MAKI

Typed or Printed Name

PRESIDENT

Capacity

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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withdrawn limited liability company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

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