L07000093722

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J. BRYAN

JUL 1 5 2012

EXAMINER

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: WORLD EQUIPMENT	FINANCE & LEASING LLC
Name of Limi	FINANCE & LEASING LLC ted Liability Company
DOCUMENT NUMBER:	L07000093722
The enclosed Resignation of Registered Agent for filing.	or a Limited Liability Company and fee are submitted
Please return all correspondence concerning this	matter to the following:
Joseph Delellis Name of Person	
Name of Firm/Company	
1980 N Atlantic Ave 816A	
Address	
Cocoa Beach FL 32931 City/State and Zip Code	2012 JUL 13 PM 1:25 SECRETARY OF STATE TALLAHASSEE, FLOREDA
E-mail address: (to be used for future annual report	notification)
For further information concerning this matter, p	dease call:
Joseph Delellis at (Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check made payable to the Florida liability company or \$25.00 for an administrative limited liability company.	Department of State for \$85.00 for an active limited ely dissolved, voluntarily dissolved or withdrawn
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

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions	of section 608.416(2) or 608.50	99, Florida Statutes, the unde	ersigned,
	Joseph Delellis	, hereby res	signs as
No.	ame of Registered Agent	, , , , , , , , , , , , , , , , , , , ,	-5
Registered Agent for	WORLD EQUIPME	ENT FINANCE & LEAS	SING LLC
	Name of Limited Liability	Company	,
L070000			
Document Numb	er, 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 a If signing on behalf of an e	V	he 31st day after the date on Resigning Agent	which this statement is filed.
_	Typed or Printed	i Name	ARY ASSI
_	Capacity		PH 1: 26 EF FLORES

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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