

L07000104022

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

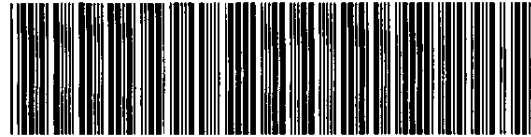
(Business Entity Name)

(Document Number)

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Resignation
of RA

10/18/10--01012--003 **87.50

FILED
2010 NOV 18 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Y00789, 00524, 00671

11/18/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JAKDOL, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L07000104022

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:

JAMES O'NEILL
Name of Person

JAKDOL, LLC
Name of Firm/Company

1303 PORTMOOR WAY
Address

WINTER GARDEN, FL 34787
City/State and Zip Code

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

For further information concerning this matter, please call:

JAMES O'NEILL at (407) 697-3674
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

October 19, 2010

James O'Neill
1303 Portmoor Way
Winter Garden, FL 34787

SUBJECT: JAKDOL, LLC
Ref. Number: L07000104022

We have received your document for JAKDOL, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida limited liability company and the document submitted is for a Florida corporation. The correct form is enclosed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 710A00024638

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

FILED
2010 MAY 18 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

GREGORY W MEIER

, hereby resigns as

Name of Registered Agent

Registered Agent for

JAKDOL, LLC

Name of Limited Liability Company

L07000104022

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