

# LD800005765

## Electronic Filing Cover Sheet

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**To:**

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

**From:**

Account Name : THE LAW OFFICES OF NICK SPRADLIN  
Account Number : I20070000020  
Phone : (813) 435-3176  
Fax Number : (813) 333-6358

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***  
Email Address: \_\_\_\_\_

**FILED**  
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### LLC REGISTERED AGENT RESIGNATION

#### JUMOX LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$25.00 |

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**C. LEWIS**  
 JUN 21 2013  
**EXAMINER**

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Corporate Filing Menu

Help

**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,  
**THE LAW OFFICES OF NICK SPRADLIN, PLLC**, hereby resigns as

\_\_\_\_\_  
Name of Registered Agent

Registered Agent for **JUMOX LLC**


\_\_\_\_\_  
Name of Limited Liability Company

**L08000005765**

\_\_\_\_\_  
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:

**NICKOLAS J. SPRADLIN, ESQ.**

\_\_\_\_\_  
Typed or Printed Name

**CEO**

\_\_\_\_\_  
Capacity

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**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withdrawn limited liability company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**

INHS17 (08/05)