# L08000011976

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1	(Requestor's Name)		
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	(City/State/Zip/Phone #)		
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-	(Business Entity Name) :		
	(Document Number)		
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Scott C. Burgess† Keri L. Dowling‡ L. Forrest Owens<sup>®</sup>

T Admitted to practice in Florida & Indiana

June 29, 2009

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, Florida 32314

RE: Tivix Leasing, LLC

Document Number: L08000011976

Our File: 827-01

## To Whom It May Concern:

Please allow this correspondence to act as notification that this firm no longer represents Tivix Leasing, LLC. Enclosed please find the following documents:

- A. Resignation of Manager;
- B. Resignation of Registered Agent; and
- C. A check in the amount of US\$110.00 representing the filing fee for the abovereferenced documents.

Please ensure that the principal and mailing address are changed to reflect as follows:

R. Fernandes Abreu, 9 Apto 211 Itaim bibi, Sao Paulo 04543-070 Brazil

Please contact me should you have any question with regard to this matter.

Sincerely,

AVIATION LEGAL GROUP, P.A.

Keri L. Dowling, Esquire kerid@aviationlegalgroup.com

KLD/ans enclosures

cc: Tivix Leasing, LLC

### COVER LETTER

Tivix Leasing, LLC
Name of Limited Liability Company **SUBJECT:** L08000011976 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: Allison Sass Name of Person Aviation Legal Group, P.A. Name of Firm/Company 5525 NW 15th Avenue, Suite 200 Address Fort Lauderdale, Florida 33309 City/State and Zip Code custa@uol.com.br
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Allison Sass 954 763-5565
Area Code & Daytime Telephone Number Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

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 sec	ction 608.416(2) or 608.509, Florida Statutes, the	undersigned,
Aviation Le	egal Group, P.A. , hereby	resigns as
	Registered Agent	
Registered Agent for	Tivix Leasing, LLC	
	Name of Limited Liability Company	······································
L0800001197	76	
Document Number, if k	nown	
	nailed to the above listed limited liability company	
The agency is terminated and the	Signature of Resigning Agent	F 09 JUL SECRETA TALLAHA
If signing on behalf of an entity:		TLED -6 M NRY OF S SSEE FLU
	Scott C. Burgess Typed or Printed Name	M 10: 3; FSTATE FLORIDA
	President	)   IO: 3/  STATE   ORIDA
	Capacity	

#### **FILING FEES:**

\$ 85.00 Active limited liability company
\$ 25.00 Administratively 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