L08000058183

| (Re | questor's Name) | <u></u> |
|---|-------------------|-------------|
| (Address) | | |
| (Address) | | |
| (Cit | y/State/Zip/Phone | e #) |
| .; PICK-UP | WAIT | MAIL |
| . (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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SECRETARY OF STATE DIVISION OF CORPORATIONS

Office Use Only

CF 25,00

T. HAMPTON MAR 1 2 2009

EXAMINER

COVER LETTER

TO: Registration Section **Division of Corporations** SUBJECT: Computer Solutions and Innovations:Brandon, LLC (Name of Limited Liability Company) Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Jeffrey S Cooper (Name of Person) (Firm/Company) 2332 Timber Grove Dr (Address) Valrico, FL 33596 (City/State and Zip Code) For further information concerning this matter, please call: Jeffrey S Cooper 813) 685-1728 (Name of Person) (Area Code & Daytime Telephone Number) STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: ✓ \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

| 1. The name of the limited liability company as it of State is: Computer Solutions and I | appears on the records of the Florida Department nnovations:Brandon, LLC |
|---|--|
| 2. This limited liability company was organized uthe State of Florida | nder the laws of: |
| 3. The Florida document/registration number of the L08000058183 | nis limited liability company is: |
| 4. I, Jeffrey S Cooper | , hereby resign as a Manager |
| (Print Name of Person Resigning) | (Print Title) |
| of this limited liability company and affirm the livesignation in writing. Signature of Resigning Member, Managing Member, | _ |
| P'' - P #25 00 /P ' ! | 1 60 1 4 60 |

Filing Fee: Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)