

L08000067979

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : A1A REGISTERED AGENT INC.
Account Number : 12009C000032
Phone : (561) 792-2236
Fax Number : (561) 202-8082

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

Email Address: _____

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14 FEB 27 PM 3:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC REGISTERED AGENT RESIGNATION
T & M OF LAKELAND, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FEB 28 2013

T. HAMPTON

H140000491573

**RESIGNATION OF REGISTERED AGENT FOR A LIMITED
LIABILITY COMPANY**

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

A1A REGISTERED AGENT, INC.

, hereby resigns as

Name of Registered Agent

Registered Agent for **T & M OF LAKE LAND, LLC**

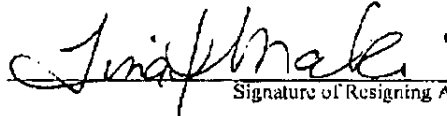
Name of Limited Liability Company

L08000067979

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:

TINA MAKI

Typed or Printed Name

PRESIDENT

Capacity

FILING FEES:

\$ 85.00

Active limited liability company

\$ 25.00

Administratively dissolved/voluntarily dissolved/
withdrawn limited liability companySECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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