

L08000071092

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

Joseph Mattheis

AUTHORIZATION BY PHONE TO

CORRECT title to be managing member

DATE 09/16/08 @ 11:31 AM

DOC. EXAM J. Bryan



900135533769

09/15/08--01021--004 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 SEP 15 PM 3:54

J. BRYAN

SEP 16 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Worksite Communication Solutions, 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:

Joseph A. Mathern
(Name of Person)

Worksite Communication Solutions, LLC
(Firm/Company)

505 Sabal Lake Dr. Unit 109
(Address)

Longwood, FL 32779
(City/State and Zip Code)

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DIVISION OF CORPORATIONS
08 SEP 15 PM 3:54

For further information concerning this matter, please call:

Joseph A. Mathern at (407) 247-6096
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED STATE
SECRETARY OF CORPORATIONS
08 SEP 15 PM 3:54

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

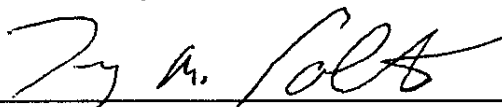
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Worksite Communication Solutions, LLC

2. This limited liability company was organized under the laws of:
Florida

3. The Florida document/registration number of this limited liability company is:
L 08 000071092

4. I, Timothy Colton, hereby resign as a Managing member
(Print Name of Person Resigning) Registered Agent
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.


Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)