Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number : I19990000006

Phone : (407)425-7010 Fax Number : (407)425-2747

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

LLC REGISTERED AGENT RESIGNATION AUTO SPECIALISTS, LLC

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RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Zimmerman, Kiser & Sutcliffe, P.A.	, hereby resigns as
Name of Registered Agent	, 1101009 1031E115 113
Registered Agent for Auto Specialists, LLC	
Name of Limited Liability Company	
Name of Limited Liability Company	
L08000088907	
Document Number, if known	
A copy of this resignation was mailed to the above listed limited liabili	ity company at its last known address.
The agency is terminated and the office discontinued on the 31st day at Signature of Resigning Agen	pendud
If signing on behalf of an emity:	
Stephen B. Hatcher, Esquire	
Typed or Printed Name	
President	
Capacity	
	- 100 mg
\$ 85.00 Active limited liability \$ 25.00 Administratively disso, withdrawn limited liab	company lived/voluntarily dissolved/

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

Tallabassee, FL 32314

INHS17 (12/13)