(08000116836

(Requestor's Name)
(Address)
(Address)
(in the second
(City/State/Zip/Phone #)
(City/State/Zip/Fnone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



900188424699

01/21/11--01018--009 **25.00

2011 JAN 21 AN W: OS SECRETARY OF STATE FALLAHASSEE, FLOORID

Fred State

T. CLINE
JAN 24 2011
EXAMINER

COVER LETTER

Division of Corporations			
SUBJECT: National Youth Cheerleading Certification	Ŋ, L	LC	
DOCUMENT NUMBER: L 08000 116836			
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee for filing.	are sub	mitted	
Please return all correspondence concerning this matter to the following:			
Kathy D. Sheive Name of Person			
Kathy D. Sheive, P.A. Name of Firm/Company			
318 N. John Young Parkway, Suite 1	SECH	2011 JAN 2	د در مناده در
Kissimmer, FL 34741 City/State and Zip Code	ETARY EF	******	A STATE OF THE STA
E-mail address: (to be used for future annual report notification)	TO SERVICE SER	60 : N HW	Pjarassi Pjaras
For further information concerning this matter, please call:			
Kathy D. Sheive at (407) 944-4010 Name of Person Area Code & Daytime Telephone Number	-		

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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 section 608.416(2) or 608.509, Florida Statutes, the undersigned, Kathy D. Sheive, hereby resigns as Registered Agent for National Youth Cheerleading Certification, LLC.

Document Number: L08000116836

A copy of this resignation was mailed to the above-named 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.

Kathy D. Sheive

SECRETARY OF STATE