

L09000056299

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

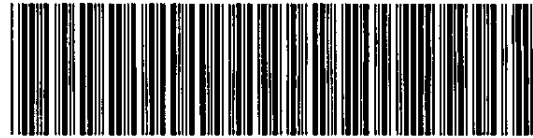
(Business Entity Name)

(Document Number)

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14 NOV -7 PM 2:37  
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11/24/14

DC

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MetroJets LLC

Name of Limited Liability Company

**DOCUMENT NUMBER:** L09000056299

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Suzanne E. Thompson

Name of Person

MetroJets LLC

Name of Firm/Company

934 pickfair Ter.

Address

Lake Mary, FL 32746

City/State and Zip Code

SuzanneKeen@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Suzanne Keen at (407) 399-1210

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

**STREET ADDRESS:**

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

# STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Suzanne E. Thompson, hereby resigns as  
Name of Registered Agent

Registered Agent for MetroJets Limited Liability Company

\_\_\_\_\_  
Name of Limited Liability Company

L09000056299  
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.

Suzanne E. Keen  
Signature of Resigning Agent

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Capacity

## FILING FEES:

\$ 85.00 Active limited liability company  
\$ 25.00 Administratively dissolved/ voluntarily dissolved/  
withdrawn limited liability company

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

FILED  
14 NOV - 7 PM 2:37  
TALLAHASSEE, FL 32314

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT,  
IN AND FOR SEMINOLE COUNTY, FLORIDA

Case No.: 13-DR-762-05N-L  
Division: FAMILY LAW

IN RE: THE NAME CHANGE OF

Suzanne Elaine Thompson  
Petitioner.

FILED IN OFFICE  
MARYANNE MORSE  
CLERK CIRCUIT COURT  
13 APR -4 AM 10:01  
BY SEMINOLE CO. FLA.

FINAL JUDGMENT OF CHANGE OF NAME (ADULT)

This cause came before the Court on {date} April 4, 2013, for a hearing on Petition for Change of Name (Adult) under section 68.07, Florida Statutes, and it appearing to the Court that:

1. Petitioner is a bona fide resident of Seminole County, Florida;
2. Petitioner's request is not for any ulterior or illegal purpose; and
3. granting this petition will not in any manner invade the property rights of others, whether partnership, patent, good will, privacy, trademark, or otherwise; it is

ORDERED that Petitioner's present name, Suzanne Elaine Thompson  
is changed to Suzanne Elaine Keen, by which  
Petitioner shall hereafter be known.

ORDERED ON April 4, 2013

Linda L. Schorn  
CIRCUIT JUDGE

COPIES TO:  
Petitioner

CERTIFIED COPY - MARYANNE MORSE  
CLERK OF THE CIRCUIT COURT  
SEMINOLE COUNTY, FLORIDA

BY [Signature] 4/4/13  
DEPUTY CLERK

