

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H130000136873)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : FASTKIT CORP Account Number : I20100000009 Phone

Fax Number

: (305)599-0839 : (305)592-9591

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

Email	Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BILLY'S TRANSMISSION & AUTO, LLC**

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

UAN 1 8 2013

D. BRUCE

Electronic Filing Menu

Corporate Filing Menu

Help

0

0

01





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it approf State is: BILLY'S TRANSMISSION & Al	pears on the records of the Flor JTO, LLC	ida Department	
2. This limited liability company was organized under FLORIDA	or the laws of:		
3. The Florida document/registration number of this L09000074182	limited liability company is:	2013 JAN 1.7 SECRUTARY	
4. I, WILLIAM MARLIN JR	hereby resign as a MGRM	(TC)	# # # # # # # # # # # # # # # # # # #
(Print Name of Person Resigning)	(Pri	u Tille)	*
4. I, WILLIAM MARLIN JR (Print Name of Person Resigning) of this limited liability company and affirm the limit resignation in writing.	ted liability company has been	notified of my	(Message of
Signature of Resigning Member, Managing Member	OR er or Manager		

Filing Fce:

\$25.00 (Required) \$30.00 (Optional)

Certified Copy: