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J. SAULSBERRY EXAMINER

OCT 2 7 2011

COVER LETTER

TO: Amendment Division of C	Section Corporations				
SUBJECT:	ES' Name o	TERO TAN, f Limited Liabilit	LLC y Company		
DOCUMENT NUM	BER:	L09000	085210		
	nation of Registered A		d Liability Company	and fee are subn	nitted
Please return all corr	respondence concernin	g this matter to	the following:		
MELISSA AF	RMITAGE, Managing Name of Person	Member	-		
	R TECHNOLOGIES	S, LLC	.		
	0 LA SERENA DRIV Address	' E	-	SECRE TALLAH	2811 OCT 26
	RT MYERS, FL 3396 ity/State and Zip Code	7	_	EGRETARY OF S LLAHASSEE, FL	
m.armi E-mail address: (to	tage@armitagemail. be used for future annual	com report notification)	-	STATE	AH II: 55
For further informati	ion concerning this ma	tter, please call:		•	
MELISSA Name	ARMITAGE c of Person	at (239 Area Cod) 233-379 e & Daytime Telephon	3 · e Number	
Enclosed is a check liability company or limited liability com	made payable to the F \$25.00 for an adminis	lorida Departme tratively dissolv	nt of State for \$85.00 ed, voluntarily dissol) for an active lim lved or withdrawi	ited 1

MAILING ADDRESS:

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 provisior	is of section 608.416	(2) or 608.509, Florida Statut	es, the undersigned,			
JAN	MES A. ETCHEC	,	hereby resigns as			
	Name of Registered Age	nt				
Registered Agent for		ESTERO TAN, LI	LC '		_	
	Name of Lin	sited Liability Company	······································		 ,	
L09000	085210					
Document Nu	mber, if known					
A copy of this resignatio	n was mailed to the a	bove listed limited liability of	ompany at its last kn	nown address	S.	
The agency is terminated	and the office disco	ntinued on the 31st day after	the date on which th	is statement	is filed.	
If signing on behalf of ar	James n entity:	Signature of Resigning Agent	>			
	HOMETE	AM CONSULTING, LLC	Ç			
	Т	yped or Printed Name		Zs	2	
MANA		NAGING MEMBER		,LA	=	
		Capacity	<u>.</u>	SE SE	SCT	7
				RETAR AHASSI	2011 OCT 26	[
				E C		, In
	FILING \$ 85.00	FEES: Active limited liability cor	nnanv	F STATE FLORID	AH 11: 55	ign.
	\$ 25.00	Active limited liability cor Administratively dissolved withdrawn limited liability	I voluntarily dissoly company	ved/ 🗟 📅	55	

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