

L09000105501

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

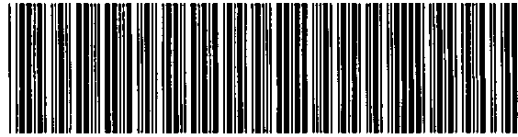
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15 AUG 24 PM 12:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 26 2015

T. HAMPTON

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** U S Digest LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L 09000105501

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:

June Franklin  
Name of Person

N/A  
Name of Firm/Company

5839-4th St. S.  
Address

St. Petersburg, Fl. 33705  
City/State and Zip Code

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

For further information concerning this matter, please call:

June Franklin at (727) 804-0881  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

15 AUG 24 PM 1:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

July 20, 2015

JUNE FRANKLIN  
5839 - 4TH ST S  
ST PETERSBURG, FL 33705

SUBJECT: U S DIGEST LLC  
Ref. Number: L09000105501

We have received your document for U S DIGEST LLC and check(s) totaling \$25.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$60.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton  
Regulatory Specialist III

Letter Number: 615A00015151

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

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

June Franklin, hereby resigns as  
Name of Registered Agent

Registered Agent for US Digest LLC

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

L09000105501  
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.

June Franklin  
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**  
15 AUG 24 PM 12:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA