

L09000108009

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Resign
Trevor's
3-17-10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Third Generation Management LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L09000108009

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:

Charles Haley
Name of Person

Third Generation Management
Name of Firm/Company

9824 Stover Way
Address

Wellington FL 33414
City/State and Zip Code

haleyhunter13@live.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles Haley at (516) 314-1719
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
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,

TDC LLC, hereby resigns as
Name of Registered Agent

Registered Agent for Third Generation Management LLC

Name of Limited Liability Company

L09000108009
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.

Signature of Resigning Agent

If signing on behalf of an entity:

Debra C Sullivan
Typed or Printed Name
HGRM
Capacity

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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withdrawn limited liability company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