

L10000039876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

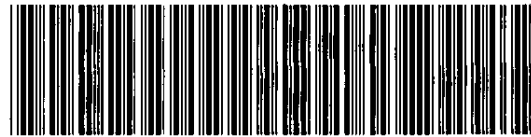
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

JUL 8 2010

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Crossroads Mobile Detailing, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ingrid M. Hooglander, Esquire

Name of Person

Law Office of Ingrid M. Hooglander

Firm/Company

330 Pauls Drive, Suite 225-5

Address

Brandon, Florida 33511

City/State and Zip Code

ingrid@imhooglander.com

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

For further information concerning this matter, please call:

Ingrid M. Hooglander, Esquire

Name of Person

at ( 813 )

902-3576

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

### MAILING ADDRESS:

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

### STREET/COURIER ADDRESS:

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



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2010 JUL -6 AM 10:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 appears on the records of the Florida Department of State is: Crossroads Mobile Detailing, LLC
2. This limited liability company was organized under the laws of:  
Florida
3. The Florida document/registration number of this limited liability company is:  
L10000039876
4. I, James C. Klein, hereby resign as a Manager  
(Print Name of Person Resigning) (Print Title)  
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)