L10000040357

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL.			
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Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:					
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12 FEB 28 AM 7: 11

IGN OF CONFORMITIONS

FEB 2 9 2012 T. HAMPTON

COVER LETTER

for

Tallahassee, Florida 32314

TO: Registration Section

2661 Executive Center Circle

Tallahassee, Florida 32301

CR2E079 (5/06)

Division of Corporations					
SUBJECT: C/EON & Synfaolt Trans LCC (Name of Limited Liability Company)					
The enclosed member, managing member or manager resignation and fee(s) are submitted filing.					
Please return all correspondence concerning this matter to:					
Full Te 1Bu/Ah (Contact Person)					
(Firm/Company)					
2856 Concht Hollow 30- (Address)					
Brandon Fl 3351/ (City/State and Zip Code)					
For further information concerning this matter, please call:					
(Name of Contact Person) at (8/3) 313-6579 (Area Code & Daytime Telephone Number)					
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327					



RECEIVED

12 FEB 28 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

February 13, 2012

FRITZ TRIBULAN 2856 CONCH HOLLOW DR BRANDON, FL 33511

SUBJECT: CLEON & SYNFAOH TRANS "LLC"

Ref. Number: L10000040357

We have received your document for CLEON & SYNFAOH TRANS "LLC" and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with 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 II Registration/Qualification Section

Letter Number: 812A00006501



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as it		
2. This limited liab	ility company was organized to	under the laws of:	
L 000	ument/registration number of t 0040357	·	
4. I, FR 1	TZ TRIBU/AW Jame of Person Resigning)	, hereby resign as a	MGR (Print Title)
of this limited lia resignation in wr	bility company and affirm the iting.	limited liability company	has been notified of my
Signature of Res	gning Member, Managing Me	mber or Manager	
/ ι			12 FEB
	\$25.00 (Required) \$30.00 (Optional)		FEB.