

L10000043196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

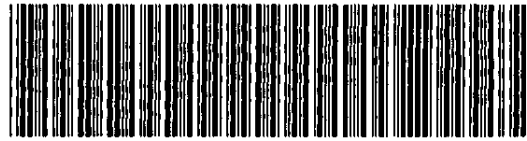
(Business Entity Name)

(Document Number)

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2011 JUL 15 PM 5:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
JUL 18 2011
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Fee Recovery Specialists
Name of Limited Liability Company

DOCUMENT NUMBER: LI0000043196

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:

Michael Ettus

Name of Person

Michael Ettus

Name of Firm/Company

1001 W. Cypress Creek Rd.

Address

Fort. Lauderdale, FL 33309

City/State and Zip Code

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

For further information concerning this matter, please call:

Michael Ettus

Name of Person

at (754-)

423-4482
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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,

Michael Ettus

, hereby resigns as

Name of Registered Agent

Registered Agent for Fee Recovery Specialist LLC

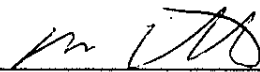
Name of Limited Liability Company

LI0000043196

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:

Michael Ettus

Typed or Printed Name

registered agent

Capacity

2011 JUL 15 PM 3:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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