L 10000067853

(Requestor's Name)		
(Address)		
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(Audiess)		
(City/State/Zip/Phone #)		
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COVER LETTER

SUBJECT: FR TAX GROUP, LLC	
SUBJECT: FR TAX GROUP, LLC Name of Limited Liability Company	У
DOCUMENT NUMBER: L10000067853	
The enclosed Resignation of Registered Agent for a Limited Liabilit for filing.	y Company and fee are submitted
Please return all correspondence concerning this matter to the follow	ving:
Name of Person	
National Corporate Research, Ltd. Name of Firm/Company	
615 S Dupont Hwy Address	
Dover, DE 19901 City/State and Zip Code	
statrep@nationalcorp.com E-mail address: (to be used for future annual report notification)	, .
For further information concerning this matter, please call:	
	3-1140 ext 3005 me 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

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**

1.

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,				
Nationa	l Corporate Research, Ltd. , hereby re	signs as		
	Name of Registered Agent			
Registered Agent for	FR TAX GROUP, LLC			
	Name of Limited Liability Company	,		
	067853			
Document Nu	mber, if known			
A copy of this resignatio	n was mailed to the above listed limited liability company a	t its last known address.		
The agency is terminated	and the office discontinued on the 31st day after the date of	n which this statement is filed.		
	A. lulps			
	Signature of Resigning Agent	75 75		
If signing on behalf of ar	entity:			
	Andrew Lundgren	FILE ANASSI ANASSI		
	Typed or Printed Name			
	V.P., National Corporate Research, Ltd.	F STA		
	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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

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