

L10000074322 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

SEP 04 2013

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CL Rooks Enterprises, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L10000074322

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:

Cynthia Rooks

Name of Person

L10000074322

Name of Firm/Company

1161 Breeze Dr

Address

Largo, FL 33770

City/State and Zip Code

crooks01@knology.net

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

For further information concerning this matter, please call:

Cynthia Rooks

Name of Person

at (727) 586-0932

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

RECEIVED
TALLAHASSEE, FLORIDA

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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,

InCorp Services, Inc.

Name of Registered Agent

, hereby resigns as

Registered Agent for CL Rooks Enterprises, LLC

Name of Limited Liability Company

L10000074322

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:

Josie A Sorensen for InCorp Services, Inc.

Typed or Printed Name

Authorized Person

Capacity

2013 SEP -3 PM 3:42
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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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