L10000106772

k
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

A. LUNT

JAN 30 2011

EXAMINER

Office Use Only



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January 25, 2012

Division of Corporations Registration Section PO Box 6327 Tallahassee, FL 32314

FRE:

AMERICANTRANSMISSION & AUTO, LLC

FEI #800643165

To Whom It May Concern:

This letter is to formally notify your office that I have resigned from partnership with Jared Thomley and co-owner for AMERICANTRANSMISSION & AUTO, LLC located at 4764 Blountstown Highway, Tallahassee, FL 32304.

I am attaching the required resignation letter/forms along with the required fee of \$55 to complete my responsibility to file with your office. Please update your records to reflect I am no longer associated with this company and no longer using the assigned FEI #800643165 effective October 1, 2011.

I have been unemployed since my resignation and now need to establish a new business as soon as possible. Please advise me of any additional information you may need or if any other official forms to be filed with your office in order to finalize my resignation and begin a new business.

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Sincerely,

William Derrick Faircloth

PO Box 261

200

Hosford, FL 32334 Cell: 850-508-8517

CC: Division of Corporations - Fictitious Name Registration # G10000083976

Secretary of State – LLC Document # L10000106772

Internal Revenue Service - FEI #800643165



COVER LETTER

Division of Corporations	
SUBJECT: American (Name	Transmission + Auto of Limited Liability Company)
The enclosed member, managing memililing.	ber or manager resignation and fee(s) are submitted for

Please return all correspondence concerning this matter to:

Registration Section

TO:

William Derrick Faircloth (Contact Person)		
(Firm/Company)	2012 JAH	en.
POBOX 261 (Address)	127 BM	
1705 ford FL 32334 (City/State and Zip Code)		<i>}</i>

For further information concerning this matter, please call:

Derrick Fairch	hat (850) 508-8517
(Name of Contact Person)	(Area Code & Daytime Telephone Number
Enclosed please find a check made payabl \$25 Filing Fee	e to the Florida Department of State for: \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

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

CR2E079 (5/06)

MAILING ADDRESS:

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



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	e limited liability company as it appears on the records of the Florida Depar	tment
of State is: 📉	merican Transmission + Auto	
2. This limited liab	oility company was organized under the laws of: d all lawful Business	- Andready
3. The Florida docu	ument/registration number of this limited liability company is:	in the second
1	00106772	
4. I, William (Print N	n D Faircloth, hereby resign as a Manage Name of Person Resigning) (Print Title)	<u>~</u>
of this limited lial resignation in wr	ability company and affirm the limited liability company has been notified criting.	of my
Signature of Resi	igning Member, Managing Member or Manager	•
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	

CR2E079 (5/06)