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(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

DEC 19 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: INDEPENDENT AUTO & TRUCK REPAIR LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L11000018861

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:

TRACEY L. SMITH
Name of Person

INDEPENDENT AUTO & TRUCK REPAIR LLC
Name of Firm/Company

424 COMMERICAL BLVD., UNIT 1
Address

NAPLES, FL 34104
City/State and Zip Code

INDEPENDENTREPAIR1@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DEBORAH THOMPSON at (239) 839-2548
Name of Person 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

FILED
2011 DEC 16 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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,

YURIY DNISTRYAN

Name of Registered Agent

, hereby resigns as

Registered Agent for INDEPENDENT AUTO & TRUCK REPAIR LLC

INDEPENDENT AUTO & TRUCK REPAIR LLC

Name of Limited Liability Company

L11000018861

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.



12/7/2011

Signature of Resigning Agent

If signing on behalf of an entity:

Yuriy Dnistryan

Typed or Printed Name

MRM

Capacity

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 DEC 16 PM 1:30

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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