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Registration Section TO: **Division of Corporations**

AAA Notary & Surety Bonds, LLC

(Name of Limited Liability Company)

STATE OF STA The enclosed member, managing member or manager resignation and fee(s) are submitted filing.

Please return all correspondence concerning this matter to:

Clare Sheridan			
(Contact Person)	_		
N/A			
(Firm/Company)	_		
1597 NE 48th Street			
(Address)	_		
Pompano Bch., FL 33064			

(City/State and Zip Code) For further information concerning this matter, please call:

Clare Sheridan	_{at (} 954	,428-7654
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

\$25 Filing Fee □ \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

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