

L120000098360

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TALLAHASSEE FLORIDA

NOV 21 2013

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SRI Investigations LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L12000098360

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:

Royce D. Wilson

Name of Person

SRI Investigations LLC

Name of Firm/Company

8875 Hidden River Parkway #300

Address

Tampa, FL 33637

City/State and Zip Code

Rwilson1k@yahoo.com

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

For further information concerning this matter, please call:

Royce D. Wilson

Name of Person

at (813) 367-2049

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
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CLERK OF THE FLORIDA
DEPARTMENT 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,

Kskr Enterprises Inc (Ronald Spiller), hereby resigns as
Name of Registered Agent

Registered Agent for SRI Investigations LLC

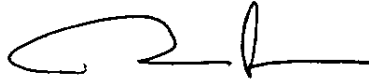
Name of Limited Liability Company

L-12000098360

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:

Kskr Enterprises Inc

Typed or Printed Name

PTD

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

INHS17 (08/05)

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