L12000099898

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
, , , , ,		
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SECRETARY OF SHARE DIVISION OF CARPAGA AND MINISTER DIVISION OF CA

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COVER LETTER

TO: Registration Section Division of Corporations

STIRTECT: Midcoast Custom Motorsports, LLC

(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to:

Jerel Folts

(Contact Person)

Midcoast Custom Motorsports, LLC

(Firm/Company)

1502 Max Hooks Road STE C

(Address)

Groveland, FL 34736-8025

(City/State and Zip Code)

For further information concerning this matter, please call:

Brandon Waters

, 352

748-8000

(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

メ 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

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

The name of the limited liability company as it of State is: Midcoast Custom Motorspo	rts, LLC
2. This limited liability company was organized uniformed and seems of the seems of	ander the laws of:
3. The Florida document/registration number of t L12000099898	his limited liability company is:
4. I, Ryan Zelent (Print Name of Person Resigning)	, hereby resign as a Managing Member (Print Title)
	limited liability company has been notified of my
Signature of Resigning Member, Managing Me	ember or Manager

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: