

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000141870 3)))



H150001418703ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRIPP SCOTT, P.A.

Account Number : 075350000065

Phone Fax Number

: (954)525-7500 : (954)761-8475

Enter the email address for this business entity to be used for **Future annual report mailings. Enter only one email address please

Email Address:

LLC REGISTERED AGENT RESIGNATION

BENTLEY AUTO RENTAL OF JACKSONVILLE LAG

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$85.00

MINE 1 2 2015

BRUCE

Electronic Filing Menu

Corporate Filing Menu

Help

. . .

H15000141870

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Flori	la Statutes, the undersigned,	
DENNIS D. SMITH, ESQ.	, hereby resigns as	
Name of Registered Agent	,	
Registered Agent for BENTLEY AUTO RENTA	L OF JACKSONVILLE LLC	
Name of Limited Liab	ility Company	
L13000120321		
Document Number, if known		
A copy of this resignation was mailed to the above li	sted 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.
Dann D. Signal	are of Resigning Agent	ZOIS SECI
If signing on behalf of an entity:	as of resigning Agent	FIL 1 015 JUN 11 ECRETARY
Typed or	Printed Name	A IO
Сарх	rity	ID: OT

FILING FEES: \$85.00 Activ \$25.00 Admi Active limited liability company
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withdrawn limited liability company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 (2/14)