

44000/52005

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015
T. LEMIEUX

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tuskawilla Karate Centers, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: ~~104000~~ L14000152005

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:

Frank Silverman
Name of Person

Championship Martial Arts, Inc.
Name of Firm/Company

3662 Avalon Park E Blvd. Ste. 201
Address

Orlando, FL 32828
City/State and Zip Code

jjcolon55@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frank Silverman at (407) 493-1590
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF RESIGNATION OF REGISTERED AGENT
FOR A LIMITED LIABILITY COMPANY**

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Championship Martial Arts., hereby resigns as
Name of Registered Agent

Registered Agent for Tuskawilla Karate Centers, LLC

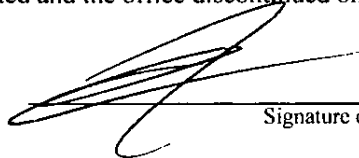
Name of Limited Liability Company

614000152005

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:

Frank Silverman

Typed or Printed Name

President.

Capacity

14 DEC 22 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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**