L20000245125

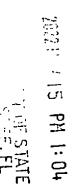
(Requestor's Name)	-
(Address)	-
(Address)	-
(City/State/Zip/Phone #)	<u>:</u>
PICK-UP WAIT MAIL	
(Business Entity Name)	-!
(Document Number)	-
Certified Copies Certificates of Status	-
Special Instructions to Filing Officer:]

Office Use Only



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COVER LETTER

Registration Section Division of Corporations TO:

J & J CUSTOM TEES & MORE LLC SUBJECT:		
SUBJECT: Name of L	imited Liability	Company
DOCUMENT NUMBER: L20000245125		
The enclosed Resignation of Registered Ager for filing.	nt for a Limited	l Liability Company and fee are submitted
Please return all correspondence concerning	this matter to th	ne following:
Chelsea Chapman		
Name of Person		
Legaline Corporate Services, INC.		
Name of Firm/Company	1	•
10601 Clarence Dr Ste 250	1	
Address	<u> </u>	.
Frisco, TX 75033-3867		
City/State and Zip Code	i	
ra@legalinc.com	•	
E-mail address: (to be used for future annual repo	ort notification)	
For further information concerning this matte	er, please call:	
Chelsea Chapman	844	386-0178) Daytime Telephone Number
Name of Person	Area Code	Daytime Telephone Number
Enclosed is a check made payable to the Flor liability company or \$25.00 for an administra limited liability company.	ida Departmen itively dissolve	t of State for \$85.00 for an active limited d, voluntarily dissolved or withdrawn

Mailing Address:

limited liability company.

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

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 605.011	 15, Florida Statutes, the und	ersigned,	
Legaline Corporate Servi	ces, INC.	;	_ , hereby resigns as	
	Name of Registered Age		_ thereby resigns as	
Registered Agent for	& J CUSTOM TEES &	& MORE LLC		
<u> </u>				
	Name of Lin	nited Liability Company		,
L20000245125				
Document No	ımber, if known			
A copy of this resignation	on was mailed to the a	above listed limited liability	company at its last known add	dress.
The agency is terminate	d and the office disco	ontinued on the 31st day afte	er the date on which this staten	nent is filed
	•	Signature of Resigning Agent		20.
If signing on behalf of a	n entity:	ļ	:	20022 KIN 15 PH 1: O4
	Chelsea Chapman			ارسا ۱۳۹۱ - کیمه ا ۱۳۱۱ - کیمه ا
		Typed or Printed Name	 برتر	55
	On Behalf of Legalin	nc Corporate Services, INC.		PP
		Capacity	ורה. ניהו	5
			7	14 P
	FILING O \$ 85.00 O \$ 25.00	Active limited liability c	ed/voluntarily dissolved/	m ·
	Make checks payah	ble to Florida Department of	State and mail to:	
		Division of Corporations P.O. Box 6327		
		Tallahassee, Fl. 32314		

INHS17 (2/14)