

M08000002391

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

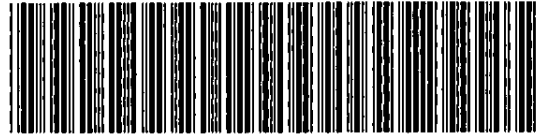
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

B. KOHR
JAN 25 2012
EXAMINER



700215482127

RECEIVED

12 JAN 25 PM 2:12

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12 JAN 25 PM 3:05

FLORIDA FILING & SEARCH SERVICES, INC.

**P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN 25 PM 3 05

DATE: 01/24/12

NAME: DUVAL TOWING & STORAGE, LLC

TYPE OF FILING: REGISTERED AGENT RESIGNATION

COST: 25.00

RETURN:

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN 25 PM 3:05

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

FLORIDA FILING & SEARCH SERVICES, INC

, hereby resigns as

Name of Registered Agent

Registered Agent for DUVAL TOWING & STORGE, LLC

Name of Limited Liability Company

M08000002391

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.

Abbie P. Hodge
Signature of Resigning Agent

If signing on behalf of an entity:

ABBIE P HODGE

Typed or Printed Name

VICE PRESIDENT

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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