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Foley & Lardner

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : FOLEY & LARDNER  
Account Number : I19980000047  
Phone : (407) 423-7656  
Fax Number : (407) 648-1743

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

Email Address: charris@jr-davis.com

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
CONTACT CENTERS OF AMERICA, LLC**

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Document prepared by: Carol Borgium

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CONTACT CENTERS OF AMERICA, 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:

TAMA DAVIS  
(Contact Person)

(Firm/Company)

210 S. HIGHLAND BLD.  
(Address)

KISSIMEE FL 34741  
(City/State and Zip Code)

For further information concerning this matter, please call:

TAMA DAVIS at 407, 870-0066  
(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

**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

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: CONTACT CENTERS OF AMERICA, LLC.

2. This limited liability company was organized under the laws of:


MICHIGAN

3. The Florida document/registration number of this limited liability company is:

MO8020003697

4. I, JOSEPH JACOBONI, hereby resign as a Mgr./CEO  
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)