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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: T.T. J. R. Billing Inc (Name of Corporation)
DOCUMENT NUMBER: P 07000/3/499
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Catherine O Rybicki (Name of Person)
Name of Firm/Company)
4240 STacey Rd E (Address)
TackSonville FL 30250 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (352) 3915032 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314



September 8, 2011

Catherine Rybicki T.T.J.R. Billing Inc 4240 Stacey Rd. e Jacksonville, FL 32250

SUBJECT: T. T. J. R. BILLING, INC.

Ref. Number: P07000131499

We have received your document for T. T. J. R. BILLING, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$52.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey Regulatory Specialist II

Letter Number: 511A00020811



FILED

RESIGNATION OF REGISTERED AGENT 21 PM 3 11 FOR A CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORID Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, Catherine O Rybicki
(Name of Registered Agent) A copy of this resignation was mailed to the above listed corporation 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 Kgent)

If signing on behalf of an entity:

Catherine p Rybicki
(Typed or Printed Name)

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314