

L06000077557

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

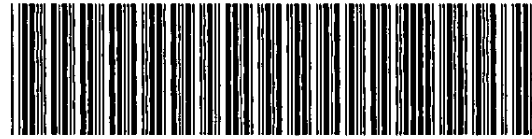
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TALLAHASSEE, FLORIDA

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N. Culligan AUG 27 2013

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Bunnell, FL 32110
Tel: 386-437-1668
Fax: 386-586-4014

August 19, 2013

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314


Re: MEV Wheatfield, LLC

Dear Sir or Madam:

Enclosed please find Resignation of RA and Statement of Change of Registered Agent for the above-referenced limited liability company along with our check in the amount of \$110.00 (\$85.00 resignation, \$25.00 Statement of Change).

Thank you.

Sincerely,


Dennis K. Bayer

DKB:sk
Enc.

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Walter E. Foster III

Name of Registered Agent

, hereby resigns as

Registered Agent for MEV Wheatfield, L.L.C.

Name of Limited Liability Company

LO6000077557

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.

WEL

Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

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withdrawn limited liability company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

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TALLAHASSEE, FLORIDA