## **Division of Corporations Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : INCORPORATING SERVICES, LTD.

Account Number : I20050000052 ; (850)656-7956 Phone

: (850)656-7953 Fax Number

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

Email Address:

LLC REGISTERED AGENT RESIGNATION MRG (2008-D) HALLANDALE, LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$85.00

TO:

Registration Section

## COVER LETTER HACCON178383 3

Division of Corporations	·
SUBJECT: MRG (2008-D) HALLANDAL	E, LLC
Name of	Limited Liability Company
DOCUMENT NUMBER: L08000107552	<u> </u>
The enclosed Resignation of Registered Age for filing.	ent for a Limited Liability Company and fee are submitted
Please return all correspondence concerning	this matter to the following:
Amanda Archambault	
Name of Person	
Incorporating Services, Ltd.	
Name of Firm/Company	<del></del>
3500 South DuPont Highway	
Address	<del></del>
Dover, DE 19901	
City/State and Zip Code	<del></del>
E-mail address: (to be used for future annual re	eport notification)
For further information concerning this mat	
Amanda Archambault	at () 531-0711 at () Daytime Telephone Number
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check made payable to the Flo liability company or \$25.00 for an administ liability company.	orida Department of State for \$85.00 for an active limited tratively dissolved, voluntarily dissolved or withdrawn limited
MAILING ADDRESS:	STREET ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

INHS17 (2/14)

P.O. Box 6327

Tallahassee, FL 32314

## Haccoo17838a 3

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions	of section 605.0115, Florida Statutes, the u	ndersigned,	
Incorporating Service	es, Ltd.	, hereby resigns as	
	Name of Registered Agent.		
Registered Agent for MR	RG (2008-D) HALLANDALE, LLC		<del></del>
	Name of Limited Liability Company		
L08000107552			
Document Num	iber, if known	- AL	2020
	n was mailed to the above listed limited liabi and the office discontinued on the 31st day		gress.
	Signature of Resigning Ag		<u> </u>
If signing on behalf of an	entity:	10 p	<u> </u>
	Amanda Archambault		
	Typed or Printed Name	_ <del></del>	
	Assistant Secretary		
	Capacity		

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

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