

# L14000129505

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

From: Account Name : ROBERT LEE SHAPIRO, P.A.  
Account Number : 119990000101  
Phone : (561) 691-0059  
Fax Number : (561) 691-0066

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

Email Address:                      jemberton@rlshapiro.com

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**LLC REGISTERED AGENT RESIGNATION  
MAINSTREET CAPITAL HOLDINGS, LLC**

Certificate of Status	0
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Page Count	01
Estimated Charge	\$85.00

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MAR 02 2018

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

Pursuant to the provisions of section 605,0115, Florida Statutes, the undersigned,

**ROBERT LEE SHAPIRO, P.A.**

, hereby resigns as

Name of Registered Agent

Registered Agent for **MAINSTREET CAPITAL HOLDINGS, LLC**

Name of Limited Liability Company

**L14000129505**

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.



Signature of Resigning Agent

If signing on behalf of an entity:

**ROBERT LEE SHAPIRO**

Typed or Printed Name

**PRESIDENT**

Capacity

FILED  
18 MAR -2 AM 9:49  
TALLAHASSEE, FLORIDA

**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withdrawn limited liability company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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