

**L1500147661**  
Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : MACFARLANE FERGUSON & MCMULLEN  
Account Number : 076077001654  
Phone : (813)273-4229  
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**LLC REGISTERED AGENT RESIGNATION  
HAVEN HHC MI, LLC**

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

JUN 21 2017  
J. HARRIS

((H17000164271 3)))

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

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

**TAYLOR R. HESS**

\_\_\_\_\_, hereby resigns as

Name of Registered Agent

Registered Agent for **HAVEN HHC MI, LLC**

\_\_\_\_\_

Name of Limited Liability Company

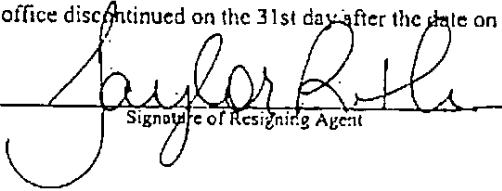
**L15000147661**

\_\_\_\_\_

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:

\_\_\_\_\_

Typed or Printed Name

\_\_\_\_\_

Capacity

2017 JUN 20 AM 8:46  
STATE DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA  
**FILED**

**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withdrawn limited liability company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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