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To:

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-1000

Fax Number : (850)558-1575

07 MAY 29 AM 8: 48
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

REGISTERED AGENT RESIGNATION

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ON OF CORPORATIO

LCM IMAGING, INC.

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, David M. Doney
(Name of Registered Agent)
hereby resigns as Registered Agent for LCM Imaging, Inc.
(Name of Corporation)
P9800009600
(Document Number, if known)
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 Replaning Agent)
(Signature of Realigning Agent)
If signing on behalf of an entity:
(Typed or Printed Name)
(Typed or Printed Name)
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(Capacity) Capacity) Capacity

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\$35.00 - Administratively dissolved/voluntarily diss

\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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