1 105000018140

(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ddress)			
(City/State/Zip/Phone #)				
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PALLSHASSEE, FLORIDS

B. BOSTICK NOV - 6 2013

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: INFINITY EQUITY HOLE		
Name of Limited Liability	y Company	
DOCUMENT NUMBER: L05000018140		
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee are su	bmitted
Please return all correspondence concerning this matter to the	he following:	
Betsy Courant		
Name of Person	-	
Hunt & Gross, PA		
Name of Firm/Company	-	
185 NW Spanish River Blvd.		
Address	- 	`)
Boca Raton, FL 33431		
City/State and Zip Code		-
betsy@huntgross.com		រ៉ា
E-mail address: (to be used for future annual report notification)	- - 	7. D
For further information concerning this matter, please call:		 ພ
Betsy Courant at (561	√997-9223	V)
Name of Person Area Code	e & Daytime Telephone Number	

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 608.416(2) or 608.509, Florida S	tatutes, the undersigned,
HCRM CORP.		, hereby resigns as
	Name of Registered Agent	
Registered Agent for _	Infinity Equity Holdings, LLC	
	Name of Limited Liability Company	· · · · · · · · · · · · · · · · · · ·
L0500001814	40	
Document N	Number, if known	
A copy of this resignat	tion was mailed to the above listed limited liabil	lity company at its last known address.
The agency is terminat	ted and the office discontinued on the 31st day a	after the date on which this statement is filed
	Signature of Resigning Age	
If signing on behalf of an entity:		
0 0	Andrew M. Gross	Ser 5
	Typed or Printed Name	<u> </u>
	President	<u> </u>
	Canacity	<u> </u>

FILING FEES:

\$85.00 Active limited liability company
\$25.00 Administratively dissolved/ withdrawn limited liability company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