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TO:	Amendment Section Division of Corporation	`					
SUBJI	ECT:Name of I in	ALAF	RMFORCE (Limited Unit)		Partnership		-
DOCU	MENT NUMBER: <u>B</u> 1	10 <u>0</u> 0000003	7				-
The en	closed Resignation of Re	gistered Agent	and fee(s) at	e submitte	d for filmg.		
Please	return all correspondence	e concerning th	is matter to.				
	A.PlatonAle:						
	Alexandrakis Finn Con	 - ·					
	3201NW24S	<u> </u>					
	Miami,FL City, State an			-			
- <u>l</u> :-	AlexandrakisLAV	N@gmail.com	า กากอนโร๊สนายก				
For fu	rther information concert	ring this matter	, please call				
	A.PlatonAlexandra	ıkis	at (786)	853.4769		
N	ame of Contact Person		Area Code a	ind Daytime	Telephone Nu	mber	
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Amen Divisi Clifto 2661 l	dment Section on of Corporations in Building Executive Center Circle massee, FL 32301		Ameno Divisio P. O. I	ING ADI iment Sec on of Corp Box 6327 assec, FL	ion Sia	CCI 10 P12:05	

RESIGNATION OF REGISTERED AGENT FOR LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

tions of section 620.1116, Florida Statutes, the unde	tsigned.	
JOSEPHC.STITGEN		
Name of Registered Agent		
ALARMFORCELP	,	
Name of Limited Partnership or Limited Liability Lin	ified Partnership	
00000037		
Number, if known		
Signature of Registered Agent	statement is filed by	
	ALARMFORCELP Name of Limited Partnership or Limited Liability Lim 00000037 Number, if known ated on the 31st day after the date on which this nent of State. Signature of Registered Agent Typed or Printed Name N/A	

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