

27 Jun. 27, 2018 10:15AM

Division of Corporations

No. 2630 P. 1

Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : US TAX CONSULTING INC  
Account Number : I20160000060  
Phone : (407)674-8969  
Fax Number : (407)674-8970

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

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LLC REGISTERED AGENT RESIGNATION  
FEKON LLC

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FL

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K. SALY

JUN 28 2018

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

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

US TAX CONSULTING INC

Name of Registered Agent

Registered Agent for FEKON LLC

Name of Limited Liability Company

L17000195752

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:

RODRIGO CAVALCANTE

Typed or Printed Name

REGISTERED AGENT

Capacity

### 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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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