

Florida Department of State
Division of Corporations
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To:

Division of Corporations
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From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.
Account Number : 078077001702
Phone : (407) 841-1200
Fax Number : (407) 423-1831

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.
mfendle@deanmead.com

Email Address: _____

REGISTERED AGENT RESIGNATION
MARY R. LAMAR FAMILY LIMITED PARTNERSHIP

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TALLAHASSEE, FLORIDA

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J. SAULSBERRY
EXAMINER
JAN 24 2013

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

Pursuant to the provisions of section 620.1116, Florida Statutes, the undersigned,

Dean Mead Services, LLC hereby resigns as
Name of Registered Agent

Registered Agent for Mary R. Lamar Family Limited Partnership
Name of Limited Partnership or Limited Liability Limited Partnership

A03000000818

Florida Document Number, if known

The agent is terminated on the 31st day after the date on which this statement is filed by the Florida Department of State.

St Lee
Signature of Registered Agent

If signing on behalf of an entity:

Steven C. Lee
Typed or Printed Name

Vice President
Capacity

Filing Fee: \$87.50
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