2/17/2016 4:31:21 PM From: To: 8406176380(1/4) Divisio of Corpor sion of Corporations **Electronic Filing Cover Sheet**

Page 1 of 2

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(((H16000034115 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Phone

Fax Number

Account Name : C T CORPORATION SYSTEM OF CITY SHAPE : (850) 205-8842 date of submission 2

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

Email Address:

REGISTERED AGENT RESIGNATION DAY OIL, LTD.

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03-4
\$35,00

FEB 1 8 2016

Electronic Filing Menu

Corporate Filing Menu

Help

February 17, 2016

FLORIDA DEPARTMENT OF STATE
Dryssion of Corporations

DAY OIL, LTD. c/o DAY EXPLORATION, INC. 3475 CENTRAL AVENUE MEMOPELS, TN 38111

SUBJECT: DAY OIL, LTD.

REF: A24005

RE-SUBMIT
Please retain original filing
date of submission <u>alg</u>

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet. We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

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Yasemin Y Sulker Regulatory Specialist II FAX Aud. #: F16000034115 Letter Number: 416A00003280

THE FEB -9 MID 20
SECRETARY OF STATE
MATHEMASSES - II GROBA

COVER LETTER .

TO: Amendment Section Division of Corporations	
SUBJECT: DA	Y OIL, LTD.
Name of Limited Partnership	or Limited Liability Limited Partnership
DOCUMENT NUMBER: A2	4005
The enclosed Resignation of Registered Agen	t and fee(s) are submitted for filing.
Picase return all correspondence concerning the	us matter to:
Theresa Alfieri	
Contact Person	
CT CORPORTATION SYSTEM	vi
Firm/Company	
111 8TH Avenue, 13th Floor	
Address	
New York, New York 10011	
City, State and Zip Code	
Theresa.Affieri@woiterskluer.co	
For further information concerning this matter	•
Theresa Alfieri	at (212) 894-8516
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check made payable to the Florid	da Department of State for:
\$140.00 (\$87.50)	50 Filing Fee and \$52,50 Certified Copy Fee
STREET ADDRESS:	MAILING ADDRESS:
Amendment Section	Amendment Section Division of Comparations
Division of Corporations Clifton Building	221 Block Ox Corporations (== 5.
2661 Executive Center Circle	
Tallahassee, FL 32301	Tallahassee, FL 32314 算元 28

INHS16 (01/06)

RESIGNATION OF REGISTERED AGENT FOR

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

ORPORATION SYSTEM , hereby res	
	_
one of Limited Partnership or Limited Liability Limited Partners	ship
05	
ber, if known	
These Guerra Agent	,
•	
CT CORPORATION SYSTEM Typed or Printed Name Assistant Secretary	16 FEB -9
Сарасцу	MI IC 20 CH STATE CH STATE CH STATE
•	CT CORPORATION SYSTEM Typed or Printed Name