Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6380

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Account Name : FOWLER, WHITE 2 Account Number : I19990000148 Phone : (813)769-7692 Fax Number : (813)228-9401

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REGISTERED	AGENT	RESIGNATIO	١
HOPS OF L	AKE NO	RMAN, LTD.	

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T. HAMPTON

10/20/2014

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

Pursuant to the provisions of section 620.1116, Florida Statutes, the undersigned, FOWLER, WHITE, GILLEN, ET AL, n/k/a Fowler White Boggs, hereby resigns as Registered Agent for HOPS OF LAKE NORMAN, LTD.

A9700000086

A copy of this resignation was mailed to the limited partnership's current mailing address.

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

Signature of Resigning Agent

If signing on behalf of an entity:

FOWLER, WHITE, GILLEN, ET AL

n/k/a Fowler White Boggs c/o Kendra L. Gaugush

Typed or Printed Name

<u>Authorized Representative</u>
Capacity

Filing Fee: \$87.50

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