

## Florida Department of State

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Division of Corporations

Fax Number : (850)617-6380

From:

: THOMAS C. COBB P.A. Account Name

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## REGISTERED AGENT RESIGNATION

GMS BRICKELL PARTNERS, INC.

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

Pursuant to the provisions	of section 620.1116, Florida St	tatutes, the undersigned	t,
Thomas C. Cobb,	Esq.	, herel	oy resigns as
(Nam	ne of Registered Agent)	,	, , , , , , , , , , , , , , , , , , ,
Registered Agent for GN	1S Brickell Partners, (Name of Limited Partnership or	Ltd.	d Dagmanhin
A97000001007	(Manue or Dimited Librarianth or	Emited Elabority Emite	a raducismp)
(Florida Document Nun	ober, if known)		
The agent is terminated of the Florida Department of	on the 31 <sup>st</sup> day after the date of State.	on which this statem	nent is filed by
	Thomas C.	. Com	
	Signature of Registere	d Agent	
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