

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : NATIONAL REGISTERED AGENTS, INC.  
Account Number : 120030000062  
Phone : (609) 716-0300  
Fax Number : (609) 716-0820

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REGISTERED AGENT RESIGNATION

FORM-A-CORP LLC

Certificate of Status	1
Certified Copy	0
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OCT 09 2008

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**RESIGNATION OF REGISTERED AGENT FOR A LIMITED  
LIABILITY COMPANY**

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

NRAI Services, Inc.

(Name of Registered Agent)

, hereby resigns as

Registered Agent for Form-A-Corp LLC

(Name of Limited Liability Company)

L01000022006

(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.

NRAI Services, Inc.  
Leslie Lofton  
(Signature of Resigning Agent)

If signing on behalf of an entity:

Leslie Lofton

(Typed or Printed Name)

Asst. Secy.

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

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