## #L020000/18/6

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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13 JUN - 6 PH 3 LATE SECRETARY OF STATE

K. SALY EXAMINER JUN 7 2013 May 30, 2013

RE: ALLIED AMERICAN CREDIT, LLC (WA.DOM)
DEBRA MANAGEMENT LLC (FL.DOM)
GLOBAL SPA NETWORK II LLC (FL.DOM)
IEI FINANCIAL SERVICES LLC (IN.DOM)

Department of State
Division of Corporations
Clifton Building
261 Executive Center Circle
Tallahassee, Florida 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is  $\underline{1}$  check in the amount of  $\underline{100.00}$  to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self- address envelope.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:lf Enclosure

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

Pursuant to the provis	ions of section 608.416(2) or 608.509, Florida Statu	ites, the undersigned,	<b>₫</b> Ø <b>芯</b>
C T CORPORATION SYSTEM		, hereby resigns as	
	(Name of Registered Agent)	,	まる
Registered Agent for _	DEBRA MANAGEMENT LLC (FL.DOM)		SSE TE
			To, u
	(Name of Limited Liability Company)		94 <b>5</b>
L02000011	816		<b>77</b>
(Document No	umber, if known)		
-	tion was mailed to the above listed limited liability		
The agency is termina	ted and the office discontinued on the 31st day after	r the date on which th	is statement is fried.
If signing on behalf of	f an entity:	٠	
	C T CORPORATION SYSTEM - Theresa Al	fieri	
	(Typed or Printed Name) ASSISTANT SECRETARY		
	(Capacity)	<del></del>	

Active limited liability company
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withdrawn limited liability company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