## L02000015519

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
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SECRETARY OF STATE
ALL AHASSEE FLOSING

J. BRYAN

JUN - 8 2011

**EXAMINER** 

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions	of section 608.416(2) or 608.5	09, Florida Statutes, the undersig	ned,		
	CFRA, LLC	, hereby resigns	as		
1	Name of Registered Agent				
Registered Agent for	333 A	CQUISITION, LLC			-
	Name of Limited Liability	Company	. <del>.</del>		_•
L020000	015519				
Document Num	ber, if known				
A copy of this resignation	was mailed to the above listed	limited liability company at its la	ist known ad	dress.	
The agency is terminated	and the office discontinued on t	he 31st day after the date on which	ch this stater	nent is	s filed.
-	Signature of	Butlue Resigning Agent			
If signing on behalf of an	entity		SE SE	<del></del>	
_	Joyce F. Be		LA.	یے	-73
	Typed or Printe	d Name	A L	9-NUL	
_	Secreta	iry	SSE Yst.	တ်	
	Capacity		OF STATE E. FLORIDA	AM 10: 40	
	FILING FEES:				

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

\$ 85.00 \$ 25.00 Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company