

Florida Department of \$tate

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Account Name : HODGSON RUSS LLP
Account Number : 072720000242
Phone : (561)394-0500
Fax Number : (561)394-3862

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REGISTERED AGENT RESIGNATION

HOPSCOTCH PROPERTIES, LLC

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RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of sections 608.416(2)	or 608.509, Flo	irida Statutes,	
the undersigned,	HRAWG Corp. (Name of Registered Agent)	, hereby re	signs as Registered Agent for	30 H
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<u></u>	HOPSCOTCH PROPERTI		3	, C
	(Name of Limited Liability Co	mpany)		
L02000016807 (Document Number, if i	anown)			D'A
A copy of this resignation known address.	tion was mailed to the abov	ve listed limited	liability company at its last	
The agency is termina statement is filed.	ted and the office discontin	nued on the 31st	day after the date on which this	;
	7			
	(Signature of Re	signing Agent)		
	·		•	
If signing on behalf of	f an entity:		:	
	David N	1. Stark	:	
	(Typed or Pri		,	
	Vice Pn		**************************************	
	(Capa	city)		
	Fee for filing this documen	ıt:		

Fee for filing this document: \$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\$25.00 - Administratively dissolved/voluntarily dissolved/ withdrawn limited liability company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
Tallahamee, FL. 32314

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