Electronic Filing Cover Sheet

Public Access System

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000221844 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

: HODGSON RUSS LLP Account Name

Account Number : 072720000242

Phone

: (716)848-1371

Fax Number

: (715)849-0349

REGISTERED AGENT RESIGNATION

OLIVIA LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$87.50

Electronic Filing Menu

Corporate Filing Menu

Help

H09000221844 3

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416(2) or 608.509, Florida Statutes,
the undersigned, <u>HRAWG CORP.</u> , hereby resigns as Registered Agent for (Name of Registered Agent)
OLIVIA LLC (Name of Limited Liability Company)
L02000027550 (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.
(Signature of Resigning Agent) OF CORRESPONDED TO SECURITY OF THE SECURITY OF
(Signature of Resigning Agent) OCT OCT OCT OCT OCT OCT OCT OC
Obvid M. Stark (Typed or Printed Name)
VICE FIESIDEIIL
(Capacity)

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\$25.00 - Administratively dissolved/voluntarily dissolved/ withdrawn limited liability company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 Tallahassee, FL 32314