# DEC-05-2013 12:49 Division of Corporations Division of Corporations

# Florida Department of State

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From:

Account Name : SHAPIRO & ADAMS, P.A.

Account Number : I19990000101 Phone : (561)691-0059 Fax Number : (561)691-0066

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# REGISTERED AGENT RESIGNATION

IKE ENTERPRISES, LLC

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PA Resign. 12/05/03

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 608.416(2) or 608.509,	Florida Statutes, the undersigned,	
Stephen Lovas		, hereby resigns as	
	(Name of Registered Agent)	, many mangaran	
Registered Agent for	IKE Enterprises, LLC	**************************************	
	(Name of Limited Liability Con	фалу)	5
L02000030208			
(Document No	umber, if known)		
A copy of this resigna	tion was mailed to the above listed limi	ted liability company at its last known	address.
The agency is termina	ted and the office discontinued on the 3	<u>.                                    </u>	SECRET DIVISION O
If signing on behalf of	an entity:		
	(Typed or Printed Na	ne)	CORPOR CORPOR
	(Capacity)		3: IC

Active limited liability company
Administratively 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withdrawn limited liability company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