Flore in De successions Division of Corporations Elegationic Miling Cover Sheet

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.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : COBB & COLE Account Number : 120030000050 Phone : (386)323-9247 Fax Number : (386)999-3310

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

imail Address: Princial Reports @ Cobb Cole. Com

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LLC REGISTERED AGENT RESIGNATION DACACO HOLDINGS, LLC

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| 0 |
| 02 |
| \$85.00 |
| |

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

TO: Registration Section Division of Corporations

4

| SUBJECT: DACACO HOLDINGS, LLC Name of Limited Liability | Company |
|---|---|
| | Company |
| DOCUMENT NUMBER: L03000015538 | |
| The enclosed Resignation of Registered Agent for a Limite for filing. | d Liability Company and fee are submitted |
| Please return all correspondence concerning this matter to t | he following: |
| JOHN P. FERGUSON, ESQUIRE | |
| Name of Person | - |
| COBB COLE | |
| Name of Firm/Company | - |
| 149 S. RIDGEWOOD AVENUE, SUITE 700 | |
| Address | - |
| DAYTONA BEACH, FL 32114 | _ |
| City/State and Zip Code | _ |
| ANNUAL.REPORTS@COBBCOLE.COM | |
| E-mail address: (to be used for future annual report notification) | _ |
| For further information concerning this matter, please call: | |
| JOHN P. FERGUSON, ESQUIRE 386 | 323-9247 |
| Name of Person Area Code | Daytime Telephone Number |
| Enclosed is a check made payable to the Florida Departme | nt of State for \$85.00 for an active limited |
| liability company or \$75.00 for an administratively dissolve | ed, voluntarity dissolved or withdrawn |

Mailing Address:

limited lishility company.

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| Pursuant to the provision | ns of section 605.011 | 5, Florida Statutes, the und | lersigned, |
|----------------------------|--------------------------------------|--|--|
| PALMETTO CHARTER | SERVICES, INC. | | _ , hereby resigns as |
| | Name of Registered Age | | |
| Registered Agent for DA | ACACO HOLDINGS, | rrc | |
| | Name of Lin | nited Liability Company | , |
| L03000015538 | | | |
| Document Nu | imber, if known | | |
| A copy of this resignation | on was mailed to the | above listed limited liabilit | ry company at its last known address. |
| The agency is terminated | d and the office disco | ontinued on the 31st day af | fer the date on which this statement is filed. |
| | | Signature of Resigning Agen | t |
| If signing on behalf of a | n entity: | organization of the state of th | |
| | JOHN P. FERGUSO | n, esquire | |
| | | Typed or Printed Name | |
| | VICE PRESIDENT | | *·· 2 |
| | | Capacity | 177 |
| | FUJNG \$ 85.00 \$ 25.00 | FEES: Active limited liability Administratively disso withdrawn limited liab | company lyed/ voluntarily dissolved/ voluntarily dissolved/ voluntarily dissolved/ 2 2 3 |

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