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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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SECRETARY OF STATE ALLAHASSEE. FLORID

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COVER LETTER

Division of Corporations
SUBJECT: Market Street Partners, LLC (Name of Limited Liability Company)
DOCUMENT NUMBER: LOYD DOO 355 T8
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Legal Dept. (Name of Person)
Market Street Partners, LLC (Name of Firm/Company)
2650 Mc Cornick DR, Ste 200 (Address)
Clearwater, FL 33759 (City/State and Zip Code)
For further information concerning this matter, please call:
Kymberlie Damet at (727) 724-7061 (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

· TO:

Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

rursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,	$\mathbf{Z}\omega^{-}$	0
Kymberlie DaMet , hereby resigns as	LC:	70
(Name of Registered Agent)	¥£	DEC -3
Registered Agent for Market Street Partners, LLC	ARY SSE	င်
	E. F.	2
(Name of Limited Liability Company)	AZ S	 •••
	TE	8
A copy of this resignation was mailed to the above listed limited liability company at its last know	n address.	
The agency is terminated and the office discontinued on the 31st day after the date on which this s	tatement is	filed.
(Signature of Resigning Agent)		
If signing on behalf of an entity:		
(Typed or Printed Name)		
(Capacity)		

FILING FEES:
\$ 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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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