

L040000036404

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

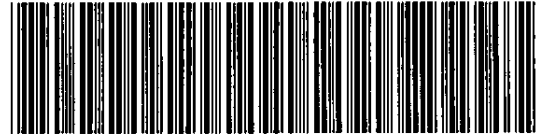
(Document Number)

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2013 JUN 26 AM 8:00  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

FILED

J. SAULSBERRY  
EXAMINER

JUN 28 2013



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 703011 7430117

AUTHORIZATION :

COST LIMIT : \$ 85,000

ORDER DATE : June 26, 2013

ORDER TIME : 2:45 PM

ORDER NO. : 703011-015

CUSTOMER NO: 7430117

**RESUBMIT**

Please give original  
submission date as file date.

CHANGE OF AGENT FILING

NAME: GLENBUSH PASS, LLC

XX RESIGNATION OF AGENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight-EXT#52956

EXAMINER'S INITIALS: \_\_\_\_\_

FILED  
2013 JUN 26 AM 8:00  
STATE  
TALLAHASSEE FLORIDA

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Corporation Service Company

, hereby resigns as

Name of Registered Agent

Registered Agent for Glenbush Pass, LLC

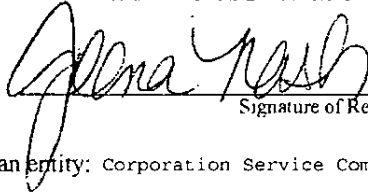
Name of Limited Liability Company

L04000036404

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

If signing on behalf of an entity: Corporation Service Company

Gloria Nash

Typed or Printed Name

Assistant, VP

Capacity

2013 JUN 26 AM 8:00  
FILED  
DEPT. OF STATE  
TALLAHASSEE, FL 32314

### 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withdrawn limited liability company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