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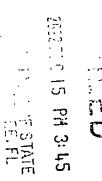
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### **COVER LETTER**

SUBJECT:  Name of Limited Liability	Company
DOCUMENT NUMBER: L04000064675	
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	he following:
CHRISTA RADULOVICH	
Name of Person	-
Name of Firm/Company	
36181 EAST LAKE RD., STE 25	
Address	-
PALM HARBOR FLORIDA 34685	
City/State and Zip Code	-
CR_SERVICES@HOTMAIL.COM	
E-mail address: (to be used for future annual report notification)	•
For further information concerning this matter, please call:	
CHRISTA RADULOVICH 727 at (	938-0335
Name of Person 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:**

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

TO:

Registration Section Division of Corporations

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the prov	visions of section 605.0115, Florida Statutes, the u	ndersigned,	
TWILA STARR PORTER her		, hereby resigns as	
	Name of Registered Agent	( teletry resigns as	
Registered Agent fo	VARTEK, L.L.C.		-
	Name of Limited Liability Company		<b>-</b> `
L04000064675			
Docume	nt Number, if known		
A copy of this resig	nation was mailed to the above listed limited liabil	lity company at its last known address.	
The agency is termi	nated and the office discontinued on the 31st day a		s filed.
If signing on behalf	of an entity:		2
	CHRISTA RADULOVICH	ت) سسر ر	. <del></del>
	Typed or Printed Name	ال آن المراجعة المستسبب المست المستسبب المستسبب الم	a my a .
	LEGAL GUARDIAN	PA	
	Capacity	PH 3: 45	

**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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

### IN THE CIRCUIT COURT FOR PASCO COUNTY. FLORIDA PROBATE DIVISION

IN RE: GUARDIANSHIP OF

TWILA STARR PORTER.

File No.

512020GA000118GAAXES

an incapacitated person.

### LETTERS OF LIMITED GUARDIANSHIP OF THE PERSON AND PROPERTY

#### TO ALLWHOM IT MAY CONCERN:

WHEREAS, CHRISTA RADULOVICH has been appointed Limited Guardian of the person and property of TWILA STARR PORTER and has taken the prescribed oath and performed all other acts prerequisite to issuance of Letters of Limited Guardianship of the Person and Property of the Ward.

NOW, THEREFORE, I. the undersigned Judge, declare CHRISTA RADULOVICH duly qualified under the laws of the State of Florida to act as Limited Guardian of the Person and Property of TWILA STARR PORTER, with full power to exercise all power or the following powers and duties pertaining to the Ward's Person and Property:

- to determine her residence;
- 2. to consent to medical and mental health treatment;
- to make decisions about her social environment or other social aspects of her life;
- 4 to contract;
- 5. to sue and defend lawsuits;
- 6. to apply for government benefits; and
- 7. To manage property or to make any gift or disposition of property;

except the Guardian shall not exercise any rights enumerated under § 744.3215(1). Fla. Stat.

The Guardian shall execute any power over any health care surrogate appointed by any valid advance directive executed by the Ward, pursuant to § 744.345, Fla. Stat., save and except the Ward's Living Will dated November 18, 2016, which shall remain effect, except upon order of this Court.

ORDERED on