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Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A. Account Number : 076077001702

Account Number: 076077001702 Phone: (407)841-1200 Fax Number: (407)423-1831

REGISTERED AGENT RESIGNATION

STARK REALITY REALTY LLC

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RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ions of section 608.416	6(2) or 608.509, Florida Stat	utes, the undersigned,		
Dean Mead Servi	ices, LLC		, hereby resigns as		
	(Name of Registered Agent)		, , noted y was an		-
Registered Agent for_	Stark Reality Realty LLC				-
	(Name of Lin	mited Liability Company)			
L04000084049					
(Document Nu	mber, if known)				
			company at its last known add		1
	DEAN, MEA	ature of Resigning Agent)	ORTH GAPOUANO & BOZ		,
	y: Stephen D. Dun				
		(yped or Printed Name)	-		0
	Vice President			9	≅∽
	FILING: \$ 85.00 \$ 25.00	(Capacity) FEES: Active limited liability co Administratively dissolve withdrawn limited liability	d/voluntarily dissolved/	05 OCT 12 PH 4: 25	FILED ECRETARY OF STATE SION OF CORPORATIONS

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