

03/25/2018 11:03 AM

Division of Corporations

001/002

Page 1 of 2

LO5000037451

(((H16000075746 3)))

Florida Department of State

Division of Corporations Electronic Filing 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.

(((H16000075746 3)))



H160000757463ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CARLTON FIELDS
Account Number : 076077000355
Phone : (813) 223-7000
Fax Number : (813) 229-4133

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

Email Address: _____

2016 MAR 25 AM 8:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

LLC REGISTERED AGENT RESIGNATION

DTRE COMPANY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2016 MAR 25 AM 8:00
OFFICE OF THE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

(((H16000075746 3)))

MAR 28 2016

S MASON

3/25/2016

((H16000075746 3)))

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

CF Registered Agent, Inc.

, hereby resigns as

Name of Registered Agent

Registered Agent for DTRE Company, LLC

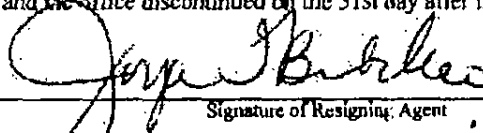
Name of Limited Liability Company

L05000037451

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:

Joyce F. Bentubo

Typed or Printed Name

Secretary

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

INHS17(2/14)

((H16000075746 3)))

2016 MAR 25 A 9:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED