

FEB. 19. 2009 8:55AM

TRENAM KEMKER

NO. 0121

P. 1 of 1

LO5000051227

Florida Department of State  
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REGISTERED AGENT RESIGNATION

RESPONSIBLE HEALTH LLC

Certificate of Status	0
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Estimated Charge	\$87.50

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Resign  
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**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,

**Nelson T. Castellano**

(Name of Registered Agent)

, hereby resigns as

Registered Agent for **Responsible Health LLC**

(Name of Limited Liability Company)

**L05000051227**

(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:

(Typed or Printed Name)

(Capacity)

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

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