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From:

Account Name : RUDEN, MCCLOSKY, SMITH, SCHUSTER & RUSSELL P.A. (ST. PETE)

Account Number : 076077001601 Phone : (727)502-8200 Fax Number : (727)502-8282

REGISTERED AGENT RESIGNATION

GULFPORT INVESTMENT PARTNERS, LLC

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ASIGN OF CHRPGFATION

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RA Resign

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RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

	STEIN , hereby resigns (Name of Registered Agent)	SEE, FLORE
		77
Registered Agent for	GULFPORT INVESTMENT PARTNERS, LLC	
	•	A C
	(Name of Limited Liability Company)	
L05000066023		•
L0000000023		•
(Document N	unber, if known) tion was mailed to the above listed limited liability company at its la	ast known address.
(Document N A copy of this resigne		
(Document N A copy of this resigne	tion was mailed to the above listed limited liability company at its la	
(Document N A copy of this resigne	tion was mailed to the above listed limited liability company at its la	
(Document N A copy of this resigne	tion was mailed to the above listed limited liability company at its leted and the office discontinued on the 31st day after the date on white the date of Resigning Agents	

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\$ 25.00 Administratively dissolved/voluntarily dissolved/withdrawn limited liability company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