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(((H080002535393)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : JONES, FOSTER, JOHNSTON & STUBBS, P.A.

Account Number : 076077003231 Phone : (561)650-0471

Fax Number : (561)650-0431

REGISTERED AGENT RESIGNATION

SISEMEN DEVELOPMENT, LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$87.50

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11/10/2008

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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,			
Jones Foster Service, LLC , hereby resigns as			
(Name of Registered Agent)			
Registered Agent for Sisemen Development, LLC		_	
(Name of Limited Liability Company)		ن	
(Name of Limited Lindshity Company)			
L05000066750			
(Document Number, if knowa)			
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 sta	tement is	filed.	
7-8/1			
(Signature of Resigning Agent)			
O (1	بالسادية أب	B	
If signing on behalf of an entity:	Man Alle	12 12	13. T. 18. P. 1
Larry B. Alexander	3	NON	-
(Typed or Printed Name)	100 A	12	
<u>Manager</u>	经二		nengara A
(Capacity)	25	PM 2:	- President
	ما الله الله الله الله الله الله الله ال	3	
FILING FEES:			•
\$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ withdrawn limited liability company			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 (08/05)