

## Florida Department of State

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## LLC REGISTERED AGENT RESIGNATION DRAPER & MCKINNEY DENTAL GROUP, PLC

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To:18506176383

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## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115, Florida Statutes, the undersigned,	
JON J. MCKINNE	, hereby resig	ms as
	Name of Registered Agent	16
Registered Agent for _	DRAPER & MCKINNEY DENTAL GROUP, PLC	<u> </u>
		沿。 呈
	Name of Limited Liability Company	72
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Document N	umber, if koown	<b>,</b>
•	on was mailed to the above listed limited liability company at it and the office discontinued on the 31st day after the date of the 31st day after the 31st day af	
If signing on behalf of	an entity:	
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FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/voluntarily dissolved/
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