L06000011188

| (Re | questor's Name) | <u> </u> | |
|---|------------------|-------------|--|
| (Ad | dress) | | |
| (Ad | dress) | | |
| (Cit | v/State/7in/Dhon | a ff) | |
| (Cit | y/State/Zip/Phon | ie #) | |
| PICK-UP | WAIT | MAIL | |
| (Business Entity Name) | | | |
| | | | |
| (Do | cument Number |) | |
| Certified Copies | _ Certificate | s of Status | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only



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SECRETARY OF STATE FALLAHASSEE, FLORID.

D. BRUCE
AUG 0 3 2011
EXAMINER

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| rursuant to the provisions o | r section 608.416(2) or 608.509, Florida Statutes, the und | iersignea, |
|-----------------------------------|--|---|
| | CFRA, LLC , hereby res | signs as |
| Na | me of Registered Agent | |
| Registered Agent for | SHERBERTH INVESTMENT ASSOCIAT | res, llc |
| | Name of Limited Liability Company | , |
| L0600001 | 1188 | |
| Document Numbe | r, if known | |
| A copy of this resignation w | vas mailed to the above listed limited liability company at | its last known address. |
| The agency is terminated an | d the office discontinued on the 31st day after the date on | which this statement is filed. |
| If signing on behalf of an en | Signature of Resigning Agent | |
| | Joyce F. Bentubo | |
| | Typed or Printed Name | |
| | Secretary | <u>ဆို</u> ပ္ပ |
| | Capacity | A P |
| | FILING FEES: \$ 85.00 Active limited liability company Administratively dissolved/ voluntar withdrawn limited liability company | JG -2 PM IN 38 ETARY OF STATE HASSEE, FLOORID |

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314