

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : FOWLER, WHITE 2  
Account Number : I19990000148  
Phone : (813)769-7692  
Fax Number : (813)228-9401

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

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DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

LLC REGISTERED AGENT RESIGNATION  
LUCID TITLE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

LLC RA Resign

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TALLAHASSEE, FLORIDA

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OCT 06 2014

T. CARTER

10/3/2014

H14000232224

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

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

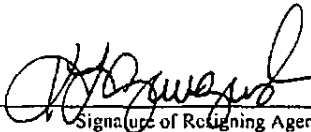
FOWLER WHITE BOGGS BANKER P.A., n/k/a Fowler White Boggs, hereby resigns as

Registered Agent for LUCID TITLE, LLC

L06000019256

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:

FOWLER WHITE BOGGS BANKER P.A. n/k/a Fowler White Boggs c/o Kendra L. Gaugush  
Typed Name

Authorized Representative  
Capacity

**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withdrawn limited liability company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

INI-IS17 (2/14)

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