

LOG000085885

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H14000232262 3)))



H140002322623ABCW

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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: \_\_\_\_\_

RECEIVED

14 OCT -3 PM 12:00

DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

LLC REGISTERED AGENT RESIGNATION  
CENTRAL FLORIDA IT SOLUTIONS, LLC

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

14 OCT -3 AM 11:44

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

H14000232262

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

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

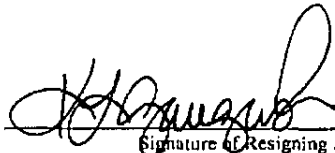
FWLER WHITE BOGGS BANKER, P.A., n/k/a Fowler White Boggs, hereby resigns as

Registered Agent for CENTRAL FLORIDA IT SOLUTIONS, LLC

L06000085885

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:

FWLER 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withdrawn limited liability company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)

H14000232262

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
14 OCT -3 AM 11:44