

Florida Department of State
Division of Corporations
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To:

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Fax Number : (850) 617-6383

From:

Account Name : BUCHANAN INGERSOLL & ROONEY PC - TAMPA OFFICE
Account Number : I19990000148
Phone : (813) 769-7692
Fax Number : (813) 228-9401

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LLC REGISTERED AGENT RESIGNATION
AGORX, LLC

Certificate of Status	0
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**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 P.A., hereby resigns as

Registered Agent for AGORX, LLC

L06000086293

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 P.A. 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withdrawn limited liability company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

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