LD7000010746

(Re	questor's Name)			
(176	questor s Marrie)			
(Ad	dress)			
•				
; (Address)				
(Cit	:y/State/Zip/Phon	e #)		
·		`		
PICK-UP	☐ WAIT	MAIL		
•				
(Bu	siness Entity Nar	me)		
(Do	cument Number)			
·	·			
Certified Conies	Certificates	s of Status		
Certified Copies Certificates of Status				
		· · · · · · · · · · · · · · · · · · ·		
Special Instructions to Filing Officer:				
		÷		

Office Use Only





800131344428

06/24/08--01017--015 **170.00



6/27 98

CT 111 Eighth Avenue New York, NY 1001 212 894 8940 tel 212 590 9180 fax \$\frac{1}{2}\$ www.ctlegalsolutions.com

June 18, 2008

RE: CADENCE ADVISERS, LLC. OCEAN'S 21 LLC.

(FL. DOM.) (NV. DOM.)

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is 1 checks in the amount of \$170.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (hm)

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA/hm Enclosure

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	is of section 608.416	i(2) or 608.509, Florida S	Statutes, the undersign	ied,
C T CORPORATION SYSTEM			, hereby resigns as	
	(Name of Registered Age	ent)		
Registered Agent for	CADENCE AI	DVISERS, LLC. (FL. I	DOM.)	
	(Name of Lii	mited Liability Company)		
L0700001074	5			
(Document Numb	er, if known)			
A copy of this resignatio	n was mailed to the a	above listed limited liabi	ility company at its las	st known address.
The agency is terminated	l and the office disco	ontinued on the 31st day	after the date on which	h this statement is filed
	M _{(Sign}	nature of Regigning Agent)		
If signing on behalf of ar	n entity:			
	•	ION SYSTEM - Theresa	a Alfieri	3
	•	Typed or Printed Name) STANT SECRETARY		题2
		(Capacity)	<u> </u>	
				3 16
	<u>FILING</u>	FEES:		
	\$ 85.00 \$ 25.00	Active limited liabilit Administratively diss withdrawn limited lia	ty company solved/ voluntarily dis ability company	ssolved/

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

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

Pursuant to the provision	ns of section 608.416(2) or 608.509, Florida Statute	es, the undersigned,		
C T CORPORATION	SYSTEM	, hereby resigns as		
· -	(Name of Registered Agent)			
Registered Agent for	CADENCE ADVISERS, LLC. (FL. DOM.)		
	(Name of Limited Liability Company)	,		
L0700001074	6			
(Document Num	ber, if known)			
The agency is terminated	d and the office discontinued on the 31st day after to	he date on which this statement is filed.		
If signing on behalf of a	n entity: C T CORPORATION SYSTEM - Theresa Alfie			
	(Typed or Printed Name) ASSISTANT SECRETARY	24 855		
	(Capacity)			

\$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