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.

(((H130000174073)))



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 : THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number: 120070000020

Phone : (813)435-3176

Fax Number : (813)333-6358

**Enter the email address for this business entity to be used for futility annual report mailings. Enter only one email address please. ** " co

Email Address:

LLC REGISTERED AGENT RESIGNATION ARRANGEMENT SYSTEMS, LLC

Certificate of Status	0
Certified Copy.	0
Page Count	01
Estimated Charge	\$25.00

J. SAULSBERRY **EXAMINER**

JAN 24 2013

Electronic Filing Menu Corporate Filing Menu

Help

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,		
THE LAW OFFICES OF NICK SPRADLIN, PLLC, hereby resigns as		
Name of Registered Agent		
Registered Agent for ARRANGEMENT SYSTEMS, LLC		
Name of Limited Liability Company		
L07000012303		
Document Number, if known		
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 sta	tement is f	iled.
Signature of Resigning Agent If signing on behalf of an entity:		
NICKOLAS J. SPRADLIN		.
Typed or Printed Name		-
CEO	ZIII3 JAN 23	
Capacity	ri _{er} i	*
FILING FEES:	AM ID: 57	
\$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/voluntarily dissolved/ withdrawn limited liability company		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
Tailahassee, FL 32314