Division of Cor

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.

(((H14000045038 3)))



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:

Email Address:

Account Name : DUSS, KENNEY, SAFER, HAMPTON & JOOS, P.A.

Account Number : I20090000089 Phone : (904)543-4300

Fax Number : (904) 543-4301

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

groups a recommon to provide the first control of abbout providence. The spring hypothetical providing a control organism

LLC REGISTERED AGENT RESIGNATION CROWE'S NEST PROPERTIES, L.L.C.

Certificate of Status	0
Ccrtified Copy	0
Page Count	02
Estimated Charge	\$85.00

Electronic Filing Menu Corporate Filing Menu

D. BRUCE Help

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.011	5, Florida Statutes, the undersigned,
JOHN S DUSS IV	, hereby resigns as
Name of Registered Ager	
Registered Agent for CROWE'S NES	ST PROPERTIES, L.L.C.
Name of Lim	ited Liability Company
L07000012359	
Document Number, if known	
A copy of this resignation was mailed to the a	bove listed limited liability company at its last known address.
The agency is terminated and the office discor	ntinued on the 31st day after the date on which this statement is filed. Signature of Resigning Agent
If signing on behalf of an entity:	
13	yped or Printed Name
	Capacity
FILING \$ 85.00 \$ 25.00	FEES: Active limited liability company Administratively dissolved/ voluntarily dissolved/ yellow withdrawn limited liability company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