

10/17/2013 1:24 FAX

001/002

Division of Corporations

Page 1 of 1

**L07000016956**  
(((H13000230998 3)))

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.**

(((H13000230998 3)))



H130002309983AB02

**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 : CARLTON FIELDS  
Account Number : 076077030355  
Phone : (813) 224-7000  
Fax Number : (813) 224-4133

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

Email Address: \_\_\_\_\_

**LLC REGISTERED AGENT RESIGNATION  
1702 VILLAGE GREEN DRIVE, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$85.00

RECEIVED  
13 OCT 17 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 OCT 17 AM 7:54

FILED

Electronic Filing Menu

Corporate Filings Menu

Help

(((H13000230998 3)))

OCT 18 2013

T. HAMPTON

((H13000230998 3)))

**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,

**CFRA, LLC**

Name of Registered Agent

, hereby resigns as

Registered Agent for **1702 VILLAGE GREEN DRIVE, LLC**

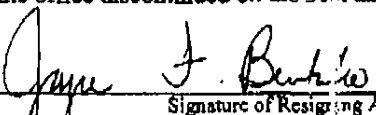
Name of Limited Liability Company

**L07000016956**

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 statement is filed.

  
Signature of Resigning Agent

If signing on behalf of an entity:

**JOYCE F. BENTUBO**

Typed or Printed Name

**SECRETARY**

Capacity

**FILING FEES:**

\$ 85.00 Active limited liability company  
\$ 25.00 Administrative dissolved/ voluntarily dissolved/  
withdrawn limited liability company

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 OCT 17 AM 7:54

FILED

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

INHS17 (08/05)

((H13000230998 3)))