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Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : THE LAW OFFICES OF NICK SPRADLIN  
Account Number : I20070000020  
Phone : (813) 435-3176  
Fax Number : (813) 333-6358

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LLC REGISTERED AGENT RESIGNATION  
ADVENTURE-US-DREAMS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
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## 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 ADVENTURE-US-DREAMS LLC

Name of Limited Liability Company

L07000079610

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:

NICKOLAS J. SPRADLIN

Typed or Printed Name

CEO

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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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