

From: Daniel Hicks P.A.  
Division of Corporations

To: (850) 617-6383

6/18/2011 10:33

892 P 001/002

Page 1 of 1

**L07000120117**

Florida Department of State  
Division of Corporations  
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((H11000183178 3)))



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To:

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

From:

Account Name : DANIEL HICKS, P.A.  
Account Number : 075061003325  
Phone : (352) 351-3353  
Fax Number : (352) 351-8054

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

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**LLC REGISTERED AGENT RESIGNATION  
OF RESTAURANTS OF MARION, LLC**

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

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11 JUL 18 AM 8:08  
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11 JUL 18

EXAMINER

From: Daniel Hicks P.A.

To: 18506176383

07/18/2011 10:34

#892 P.002/002

((H11000183178 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,

Digvijay Gaekwad, hereby resigns as  
Name of Registered Agent

Registered Agent for GF Restaurants of Marion, LLC

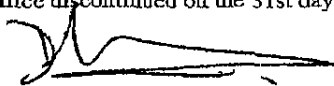
Name of Limited Liability Company

L07000120117

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:

Typed or Printed Name

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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