

LO7000122900

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

A. LUNT

APR 10 2009

EXAMINER

Office Use Only



300149077423

04/09/09--01032--023 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 APR -9 PM 4:08

FILED

CFRA, LLC
REGISTERED AGENT SERVICES
A SUBSIDIARY OF CARLTON FIELDS

Corporate Center Three at International Plaza
4221 W. Boy Scout Blvd, 10th Floor
Tampa, Florida 33607-5736

Mailing Address:
P. O. Box 3239
Tampa, Florida 33601-3239
Tel (813) 223-7000 Fax (813) 229-4133

April 7, 2009

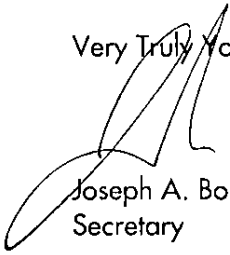
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re: RESIGNATION OF REGISTERED AGENT – MAVERICK INVESTMENT MANAGEMENT, LLC

Gentlemen:

Please find enclosed a Resignation of Registered Agent form for Maverick Investment Management, LLC. Also enclosed is Carlton Fields' Check No. 463987 in the amount of \$25.00 for the filing fee.

Very Truly Yours,


Joseph A. Borrero for Joyce F. Bentubo
Secretary

JFB/jab
Enclosures

FILED
2009 APR -9 PM 4: 08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 Maverick Investment Management, LLC

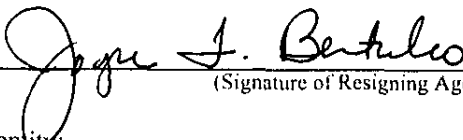
(Name of Limited Liability Company)

L07000122900

(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 document is filed.



(Signature of Resigning Agent)

If signing on behalf of an entity:

Joyce F. Bentubo

(Typed or Printed Name)

Secretary

(Capacity)

FILED
2009 APR -9 PM 4:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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