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ATTN: CATHY

Florida Department of State

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Fax Number : (850) 617-6383

From:

Account Name : KILLGORE, PEARLMAN, STAMP, ORNSTEIN & SQUIRES

Account Number : I19980000007 Phone

: (407)425-1020

Fax Number : (407)839-3635

Efficer 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 NORTH FLORIDA CYCLES, LLC

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Page Count	02
Estimated Charge	\$85.00

REQUEST DRIGINAL FILE DATE OF 10/24/14

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Oct 24 2014 09:34am

P1

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Division of Corporations

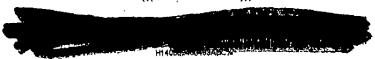
Page 1 of 1

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Heip

Nov 24 2014 02:38pm

P003/004

Fax Audit No.: <u>H14000248049 3</u>

COVER LETTER

TO: Re

Registered Section

Division of Corporations

SUBJECT: North I

North Florida Cycles, LLC

DOCUMENT NUMBER:

L07000125434

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Killgore	Pearlman Stamp Ornstein & Squires, P.A.
	Pitm/Compuny
	2 South Orange Avenue, 5th Floor
	Address
(*· ··	Orlando, FL 32801
	City, State & Zip

For further information concerning this matter, please call Lynn Badders at 407-425-1020.

Sincerely,

Lynn Badder Legal Assistant

SECKE VAN SEE FLOORIO

Fax Audit No.: <u>H14000248049 3</u>

Nov 24 2014 02:38pm

P004/004

Fax Audit No.: H14000248049 3

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned, Mark L. Ornstein, hereby resigns as Registered Agent for North Florida Cycles, LLC, Document Number L07000125434.

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 31th day after the date on which this statement is filed.

Mark L. Ornstelli, Registered Agent

FILED 14 DCT 24 PM 12: 08 SECRETARISSEE FROME

Fax Audit No.: <u>H14000248049 3</u>