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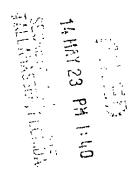
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(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

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JUN 0 6 2014 C. CARROTA: .

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of se	ection 605.0115	, Florida Statutes, the	undersigned,			
Linda R. Minck			, hereby resign	is as		
Name o	of Registered Agent		, , ,			
Registered Agent for	Negawat	t Services LI	·C			-
	Name of Limit	ted Liability Company	<u> </u>			_
L08000003062						
Document Number, if	known	<u> </u>				
A copy of this resignation was	mailed to the al	bove listed limited liab	oility company at its	last known a	ddress	i.
The agency is terminated and t	he office discor	Signature of Resigning A		hich this state	ement i	is filed
If signing on behalf of an entity	y:					
	Ту	ped or Printed Name	——————————————————————————————————————		14	
		Capacity			版 23 P	
	FILING 3 \$ 85.00 \$ 25.00	FEES: Active limited liabil Administratively dis withdrawn limited	lity company ssolved/ voluntarily liability company	dissolved/		40.160

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