

LO8000009256

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

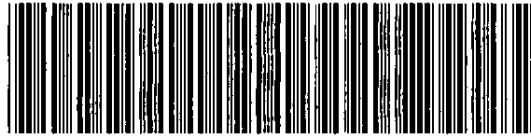
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600166256126

02/04/10--01020--009 **25.00

T. CLINE

FEB - 5 2010

EXAMINER

SECRETARY OF STATE
TALLAHASSEE, FL 32399

2010 FEB -4 AM 10:51

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VGH INVESTMENTS LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L08000009256

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:

NICK SPRADLIN
Name of Person

THE LAW OFFICES OF NICK SPRADLIN, PLLC
Name of Firm/Company

12000 N. DALE MABRY HWY, SUITE 110
Address

TAMPA, FLORIDA 33618
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NICK SPRADLIN at (813) 4353176
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

2010 FEB -4 AM 10:51
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,

THE LAW OFFICES OF NICK SPRADLIN, PLLC, hereby resigns as

Name of Registered Agent

Registered Agent for VGH INVESTMENTS LLC

Name of Limited Liability Company

L08000009256

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]
Signature of Resigning Agent

If signing on behalf of an entity:

Nick Spradlin
Typed or Printed Name

Owner/Manager
Capacity

2011 FEB -4 AM 10:51
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