Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Number : 076077001702 : (407)841-1200 Phone : (407) 423-1831 Fax Number

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LLC REGISTERED AGENT RESIGNATION LIBBY ONE LLC

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8

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JUL 0 9 2018

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115	, Florida Statutes, the undersig	gned,	
Dean Mead Services, LLC	, he	ereby resigns as	
Name of Registered Agen	(•	
Registered Agent for			
Libby One, LLC			,
Name of Lim	ted Liability Company		
L08000028233			
Document Number, if known			
A copy of this resignation was mailed to the a The agency is terminated and the office discor-		1	
Show	Signature of Resigning Agent		
If signing on behalf of an entity:			
Stephen R. Loor	nėy		
	yped or Printed Nume		
Vice President o	f Sole Member		
	Capacity		
<u>FILING</u> \$ 85.00 \$ 25.00 Маке checks рлуя!	Active limited liability com Administratively dissolved, withdrawn limited liability ole to Florida Department of Sta Division of Corporations P.O. Box 6327 Tallaliassee, FL 32314	company	2018 JUL -6 /
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