

FLORIDA FILING & SEARCH SERVICES, INC.
P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 10/30/2018

NAME: THE PHASE 5 GROUP LLC

TYPE OF FILING: REGISTERED AGENT RESIGNATION

COST: 85.00

RETURN:

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge

**STATEMENT OF RESIGNATION OF REGISTERED AGENT
FOR A LIMITED LIABILITY COMPANY**


Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,
FLORIDA FILING & SEARCH SERVICES INC _____, hereby resigns as
Name of Registered Agent

Registered Agent for **THE PHASE 5 GROUP** _____
Name of Limited Liability Company

L08000042215

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 of Resigning Agent

If signing on behalf of an entity:
ABBIE HODGE

Typed or Printed Name
SECRETARY

Capacity

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withdrawn limited liability company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**

FILED
18 OCT 31 AM 3:15
TALLAHASSEE, FLORIDA