

LO8 000064469

(Requestor's Name)

(Address)

(Address)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

T. HAMPTON

DEC 18 2009

EXAMINER



A LEGAL PROFESSIONAL ASSOCIATION

850 PARK SHORE DRIVE
TRIANON CENTRE - THIRD FLOOR
NAPLES, FL 34103
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December 15, 2009

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re: Medical Alliance For Contract Manufacturing, LLC

Dear Sir/Madam:

Enclosed is a Resignation of Registered Agent For a Limited Liability Company, along with our check in the amount of \$25.00 for the cost of the filing fee.

Should you have any questions concerning the foregoing please give me a call.

Sincerely yours,

Diane L. Komoroski
Secretary to C. Neil Gregory

/dk
Enclosure

605451 v_01

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,

R&A Agents, Inc., hereby resigns as
Name of Registered Agent

Registered Agent for Medical Alliance For Contract
Manufacturing, LLC
Name of Limited Liability Company

LO8000064469
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:

C. Neil Gregory
Typed or Printed Name
Assistant 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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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