Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000008502 3)))



H140000085023ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number : 120070000020 Phone : (813)435-3176

: (813)333-6358 Fax Number

**Enger the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC REGISTERED AGENT RESIGNATION HURRICANE SEASON, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

FESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

	to the provisions of section 605.0115, Florida Statutes, the undersigned,
Pursuant	to the provisions of section 605.0115, Florida Statutes, the undersigned,
	AW OFFICES OF NICK SPRADLIN, PLLC, hereby resigns as
	Name of Registered Agent
Registere	tagent for HURRICANE SEASON, LLC
	Op.
	Name of Limited Liability Company
L0800	0090081
	Document Number, if known
А сору о	this resignation was mailed to the above listed limited liability company at its last known address.
The ager	cy is terminated and the office discontinued on the 31st day after the date on which this statement is filed.
	Signature of Resigning Agent
If signinį	on behalf of an entity:
	NICKOLAS J. SPRADLIN
	Typed or Printed Name
	CEO
j	
ļ	FILING FEES: \$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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
INHS17	12/13)