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(Re	equestor's Name)			
(Address)				
(Address)				
(Ci	ty/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

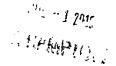
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COVER LETTER

SUBJECT: BEST BUYER DISCOUNTS, LLC Name of Limited Liability Company				
DOCUMENT NUMBER: LOSDOO 9 13 75				
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:				
WALTER H. MESSICK Name of Person				
Name of Firm/Company				
1900 LORPORATE BLVD. STE 101 WEST Address				
BOCA RATON, FL 3343 (City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Name of Person at (561) 995-8868 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.				

STREET ADDRESS:

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Registration Section

Clifton Building

INHS17 (2/14)

MAILING ADDRESS:

Division of Corporations

Tallahassee, FL 32314

Registration Section

P.O. Box 6327

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TO: Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115, Florida	Statutes, the undersigned,	
WALTER 14.	MESSICK, P.A.	, hereby res	riane ae
	Name of Registered Agent	, nereby les	signs as
Registered Agent for _	BEST BUYER	PISCOUNTS,	LLC
	Name of Limited Liabili	ty Company	,
Logo O O Document N	O 9 1 3 7 5 Number, if known		
A copy of this resignat	ion was mailed to the above liste	ed limited liability company a	t its last known address.
The agency is terminat	ed and the office discontinued o	n the 31st day after the date o	n which this statement is filed
	Water to.	manul	
	Signature	of Resigning Agent	
If signing on behalf of	an entity:		
	WALTER	H, MESSICK	
	Typed or Pri	H, MESSICK	
	PRESIDEN		
	Capacit	у	
	\$ 25.00 Admin	limited liability company istratively dissolved/volunta awn limited liability compan	iy ASE 5
	Division P.C	ida Department of State and n of Corporations D. Box 6327 issee, FL 32314	JUN 30 AM II: 50 CRETARY OF STATI LAHASSEE, FLORI

INHS17 (2/14)