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TO:		2010 SEG FALL
10.	Division of Corporations	ं> रें चा
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	Fax Number : (850) 617-6380	355
		SSE TANK
From:	ı	
	Account Name : TRIPP SCOTT, P.A.	<u>i</u> ωΘ>
	Account Number : 075350000065	
	Phone : (954)525-7500	55 =
	Fax Number : (954) 761-8475	
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT RESIGNATION BYSM, LLC

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2/8/2010

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RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

	ons of section 608.416(2) or 608.509, Florida Statutes, the undersi	lgmod, 在符号
Angell Con	Name of Registered Agent	ONFEB
Registered Agent for _	BYSM, LLC	<u> </u>
	······································	
	Name of Limited Liability Company	93
L08000100	661	I: 42
Document N	lumber, If known	
A copy of this resignati	ion was mailed to the above listed limited liability company at its	last known addr e ss,
The agency is terminate	ed and the office discontinued on the 31st day after the date on wh	
	Syn E. Den Vice President Signapore of Registing Agent	+
If signing on behalf of a	an entity:	
	Gregory E. Young	
	Vice President Number	
	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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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
Tallahussee, FL 32314

INHS17 (08/05)