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Division of Corporations

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From:

: Ala REGISTERED AGENT INC. Account Name

Account Number: I20090000032 : (866)703-8828 Phone ; (561)202-8082 Fax Number

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LLC REGISTERED AGENT RESIGNATION ACOY AT YOUR SERVICE LLC

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TO:18506176383

4100001069473

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	s of section 608.416(2) or 608.509, Florida Statutes, the undersigned,	
	EGISTERED AGENT INC. hereby resigns as	
Registered Agent for		
	Name of Limited Liability Company	
L08000 Document Nur		
A copy of this resignation	n 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 state of the state of Resigning Agent	ement is filed.
If signing on behalf of an	entity:	
,	TINA MAKI	7.0 ±
	Typed or Printed Name PRESIDENT	MAY API
•	Capacity	HASSEE.
	FILING FEES: \$85.00 Active limited liability company \$25.00 Administratively dissolved/voluntarily dissolved/ withdrawn limited liability company	E STATE

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Talinbassee, FL 32314

INHS17 (08/05)

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