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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

JUN 28 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Integra FX, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L08000117706

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:

Leslie Arouh
Name of Person

Integra FX, LLC
Name of Firm/Company

1625 S. Congress Avenue, Suite 110
Address

Delray Beach, FL 33445
City/State and Zip Code

les@nhllc.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leslie Arouh at (561) 274-1250
Name of Person 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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