## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLEN PLL

Account Number : 120070000020

: (813) 435-3176

Phone Fax Number

: (813)333-6358

\*\*Enter 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 **HEMERA LLC**

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Electronic Filing Menu

Corporate Filing Menu

Help

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,	
THE LAW OFFICES OF NICK SPRADLIN, PLLC, hereby resigns as	2014 FEB SECRE
Name of Registered Agent	7 7
Registered Agent for HERMAL LLC	
	SERIO N
Name of Limited Liability Company	
L08000117748	SHATE LORID
Document Number, if known	ኒ <del>-</del>
A copy of this resignation was mailed to the above listed limited liability company at its last	t known address.
The agency is terminated and the office discontinued on the 31st day after the date on which	h this statement is filed.
$\mathcal{I}_{\mathcal{I}}$ .	

Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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