Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000039863 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number : I20070000020 : (813)435-3176 Phone

: (813)333-6358 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please

Cms.	. 7	Address:	

LLC REGISTERED AGENT RESIGNATION MOLD PLUS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

FEB 2 0 2014 D. BRUCE

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
Name of Registered Agent
Registered Agent for MOLD PLUS, LLC
Name of Limited Liability Company
L0900003522
Document Number, if known
A copy of this resignation 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 statement is filed.
Signature of Resigning Agent
If signing on behalf of an entity:
NICKOLAS J. SPRADLIN
Typed or Printed Name
Capacity
FILING PEES: \$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/voluntarily dissolved/withdrawn limited liability company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