

LOG 000026219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

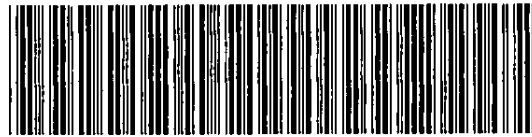
(Business Entity Name)

(Document Number)

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B. KOHR
JUN 13 2012
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: USG7 LLC
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: L09000026219

The enclosed Resignation of Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Graham Wright

Contact Person

USG7 LLC

Firm/Company

2312 Academy Circle West #101

Address

Kissimmee, Florida 34744

City, State and Zip Code

gwright@usg7.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Graham Wright

Name of Contact Person

at (678)

685-8744

Area Code and Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for:

☒ \$87.50 Filing Fee

☐ \$140.00 (\$87.50 Filing Fee and \$52.50 Certified Copy Fee)

STREET ADDRESS:

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

MAILING ADDRESS:

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

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**RESIGNATION OF REGISTERED AGENT
FOR
~~LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP~~
LIMITED LIABILITY COMPANY**


608.416(2) or 608.509
Pursuant to the provisions of section ~~620.116~~, Florida Statutes, the undersigned,

Thomas & Berke, P.A. _____, hereby resigns as
Name of Registered Agent

Registered Agent for _____ **USG7 LLC** _____
Name of ~~Limited Partnership or Limited Liability Limited Partnership~~
Limited Liability Company

L09000026219
Florida Document Number, if known

The agent is terminated on the 31st day after the date on which this statement is filed by the Florida Department of State.



Signature of Registered Agent

If signing on behalf of an entity:

Walter Thomas
Typed or Printed Name

Former Attorney
Capacity

Filing Fee: \$87.50
Certified Copy (optional): \$52.50

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