

Jan. 5, 2016 1:11 PM Gray Robinson Division of Corporations No. 1867
1/5/2016
L09000029995

Florida Department of State
Division of Corporations
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**LLC REGISTERED AGENT RESIGNATION
MADCLASS, LLC**

Certificate of Status	0
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JAN 06 2016

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**STATEMENT OF RESIGNATION OF REGISTERED AGENT
FOR A LIMITED LIABILITY COMPANY**

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Michael E. Neukamm _____, hereby resigns as

Name of Registered Agent

Registered Agent for Madclass, LLC

Name of Limited Liability Company

L09000029995

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:

Typed or Printed Name

Capacity

FILED
16 JAN -5 AM 9:44
TALLAHASSEE, FL 32314

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withdrawn limited liability company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