Florida Department of State
Division of Corporations
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```
To:
        Division of Corporations
        Fax Number      :  (850)617-6383

From:
        Account Name    :  THE LAW OFFICES OF NICK SPRADLIN PLLC
        Account Number  :  I20070000020
        Phone           :  (813)435-3176
        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
AUTOMOBILE CONCIERGE, LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	$25.00

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MAR 2 6 2014

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Tuesday, March 25, 2014

STATEMENT OF 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 SPRADLIN, PLLC
_____ , hereby resigns as
Name of Registered Agent

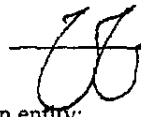Registered Agent for AUTOMOBILE CONCIERGE, LLC
_____

Name of Limited Liability Company

L09000036497
_____
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

CEO
_____
Capacity

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           withdrawn limited liability company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

INHS17 (2/14)