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From:

: INCORPORATING SERVICES FL Account Name

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LLC REGISTERED AGENT RESIGNATION BLADE SPECIALTY CONTRACTING, LLC

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Jun. 28. 2010 1:14PM Incorporating Services, LTD.

Amendment Section

No. 6740 P. 2 (((10000147246:3)))

TRANSMITTAL LETTER

DOCUMENT NUMBER: L090000389			ty Compa				
The enclosed Resignation of Registered Ag		a Limit	ed Liabil	ity Compa	ny and fe	are submit	ed
Please return all correspondence concerning	g this m	atter to	the folio	wing:			
EDIE WHITEBREAD (Name of Person)	 .	<u>· _</u>	· ·	•			
INCORPORATING SERVICES, LTD.							
(Name of Firm/Company)						i	
3500 SOUTH DUPONT HIGHWAY		.,					
(Address)	·				ė		
DOVER, DE 19901				· .			
(City/State and Zip Code)			_				
For further information concerning this mat	tter, ple	nse cal	l : .				
EDIE WHITEBREAD	nt (302	531	- 0855		•	
(Name of Person)	** <u>\</u>	Атеа С	ode & Day	time Telep	hone Num	ber)	

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

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

001517(11/02)

Jun. 28. 2010 1:148M

Incorporating Services, LTD.

No. 6740

(((H10000147246 3)))

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

INCORPORATING SERVICES, LTD.		hereby resigns as	
	(Name of Registered Agent)		• .
Registered Agent for	BLADE SPECIALTY CONTRACTING, LL	<u>c</u>	
	(Name of Limited Liability Company)		
L09000038913			
(Document N	ismber, if known)		
	ated and the office discontinued on the 31st day after		
If signing on behalf o	of an entity:		
· ·	CANDICE B. SWETLAND		51) 12
	(Typed or Printed Name) ASSISTANT SECRETARY		<u> </u>
	(Capacity)	- <u> </u>	See S. E. Marie

Active limited liability company
Administratively dissolved/voluntarily dissolved/
withdrawn limited liability company

Make checks payable to Fiorida Department of State and mall to: Division of Corporations P.O. Box 6327 Taflahassen, FL 32314