Division of Corporations

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To:

Division of Corporations &

Fax Number : $(850)617^{1/2}6383$

From:

Account Name : Ala REGISTERED AGENT INC.

Account Number : I20090000032

Phone : (561)792-2236

Fax Number : (561)202-8082

**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 STT OF AMERICA, LLC

Certificate of Status 0 Certified Copy 0 Page Count 02 Estimated Charge \$85.00

MAY 2 4 2017

S. YOUNG

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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	1,
A1A REGISTERED AGENT INC.	py resigns as
Name of Registered Agent	,
Registered Agent for STT OF AMERICA, LLC	
Name of Limited Liability Company	
L09000083947	
Document Number, if known	
A copy of this resignation was mailed to the above listed limited liability compa	ny at its last known address.
The agency is terminated and the office discontinued on the 31st day after the the 3	ate on which this statement is filed. HAY 23
If signing on behalf of an entity:	1.11
TINA MAKI	
Typed or Printed Name 1 to PRESIDENT	AM 11: 31
Capacity	

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Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

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