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Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : LLOYD GRANET  
Account Number : 074632001025  
Phone : (561) 999-9300  
Fax Number : (561) 999-9400

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LLC REGISTERED AGENT RESIGNATION  
NRY LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

K. SALY  
EXAMINER  
APR 8 2013

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## 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,

Lloyd Granet, P.A.

, hereby resigns as

Name of Registered Agent

Registered Agent for NRV LLC


Name of Limited Liability Company

L10000067044

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:

Lloyd Granet, Esq.

Typed or Printed Name

President

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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 (08/05)

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