

JUN-29-2012 FRI 0 15  
Division of Corporations

11000007508

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H12000172525 3)))



H120001725253ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED

12 JUN 29 PM 4:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

From: Account Name : SMITH HULSEY & BUSEY  
Account Number : 075030000653  
Phone : (904) 359-7700  
Fax Number : (904) 359-7712

JUL 02 2012  
L. SELLERS

\*\*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  
ULTIMATE HEALTH & WELLNESS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$85.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 JUN 29 AM 11:17

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

(((H12000172525 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,

Smith Hulsey & Busey

Name of Registered Agent

, hereby resigns as

Registered Agent for Ultimate Health & Wellness, LLC

Name of Limited Liability Company

L11000007508

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:

M. Richard Lewis, Jr.

Typed or Printed Name

Vice 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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 JUN 29 AM 11:17

FILED

INHS17 (08/05)

(((H12000172525 3)))