

L 11000010839

Florida Department of State
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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

2013 OCT 28 PM 2:23

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

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**LLC REGISTERED AGENT RESIGNATION
 COMANCHE PASS, LLC**

Certificate of Status	0
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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

J. SAULSBERRY
 EXAMINER
 OCT 29 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,

THE LAW OFFICES OF NICK SPRADLIN, PLLC, hereby resigns as

Name of Registered Agent

Registered Agent for _____

COMANCHE PASS, LLC


Name of Limited Liability Company

L11000010839

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

2013 OCT 28 AM 9:23

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- \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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)