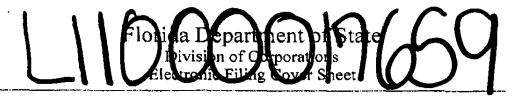
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Fax Number : (850)617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number: I20070000020 : (813)435-3176 Phone Fax Number : (713)429-1276

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## LLC REGISTERED AGENT RESIGNATION PROPERTY MANAGEMENT EXPERTS OF FLORIDA

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## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115	5, Florida Statutes, the undersigned,					
THE LAW OFFICES OF NICK SPRA	DLIN, PLLC , hereby resigns at	: s				
Name of Registered Agent						
Registered Agent for PROPERTY MANA	GEMENT EXPERTS OF FLORIDA, I	_LC				
Name of Limi	ited Liability Company	<del>,</del> :				
L11000017659		,				
Document Number, if known						
A copy of this resignation was mailed to the a	bove listed limited liability company at its las	t known address.				
The agency is terminated and the office discor	ntinued on the 31st day after the date on which	h this statement is filed				
If signing on behalf of an entity:	Signature of Resigning Agent	; ; ;				
	NICKOLAS J. SPRADLIN ESQ.  Typed or Printed Name					
CEO	year at things thank					
	Capacity					
FILING \$ 85.00 \$ 25.00 Make checks payab	Active limited liability company Administratively dissolved/voluntarily dis withdrawn limited liability company  le to Florida Department of State and mail to: Division of Corporations	16 SEP 12 M SECRETARY OF S				
INHŠ17 (2/14)	P.O. Box 6327 Tallahassee, FL 32314	4 8: 55 STATE LORIDA				