

L1100018448

Florida Department of State
Division of Corporations
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((H12000116140 3)))



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

From:
Account Name : INCORPORATING SERVICES FL
Account Number : I20050000052
Phone : (302) 531-0855
Fax Number : (850) 656-7953

FILED
12 APR 27 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Email Address: _____

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LLC REGISTERED AGENT RESIGNATION CONNOISSEUR CONSULTING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
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C. LEWIS
APR 30 2012
EXAMINER

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Apr. 27. 2012 11:47AM Incorporating Services, LTD.

No. 7271 P. 2

((H12000116140 3)))

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CONNOISSEUR CONSULTING, LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: L11000018448

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EDIE WHITEBREAD
(Name of Person)

INCORPORATING SERVICES, LTD.
(Name of Firm/Company)

3500 S. DUPONT HWY
(Address)

DOVER, DE 19901
(City/State and Zip Code)

For further information concerning this matter, please call:

EDIE WHITEBREAD at (302) 531.0855
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

((H12000116140 3)))

Apr. 27. 2012 11:47AM

Incorporating Services, LTD.

No. 7271 P. 3

((H12000116140 3))

**RESIGNATION OF REGISTERED AGENT FOR A LIMITED
LIABILITY COMPANY**

FILED
12 APR 27 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

INCORPORATING SERVICES, LTD.

(Name of Registered Agent)

, hereby resigns as

Registered Agent for **CONNOISSEUR CONSULTING, LLC**

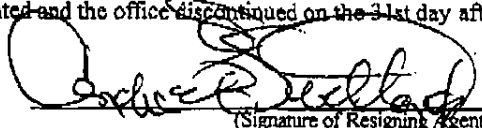
(Name of Limited Liability Company)

L11000018448

(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:

CANDICE B. SWETLAND

(Typed or Printed Name)

ASSISTANT SECRETARY

(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)

((H12000116140 3))