L11000067198

Florida Department of State
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Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.
Account Number : 076077001702
Phone : (407)841-1200
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LLC REGISTERED AGENT RESIGNATION
COLONY PARTNERS, L.L.C.

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Dean Mead Services, LLC, hereby resigns as

Name of Registered Agent

Registered Agent for Colony Partners, L.L.C.

Name of Limited Liability Company

L11000067198

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.

DEAN MEAD SERVICES, LLC

By: Stanley A. Gravenmier

Signature of Resigning Agent

If signing on behalf of an entity:

Stanley A. Gravenmier

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$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

INH517 (2/14)

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