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.

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: INCORP SERVICES INC

Account Number : I20120000007

Phone

: (702)866-2500

Fax Number

: (702)866-2689

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

LLC REGISTERED AGENT RESIGNATION SUN BAY WINTER PARK LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:			
Name of Limited Liability	Company		
DOCUMENT NUMBER: L11000107440		,	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee ar	e submitted	
Please return all correspondence concerning this matter to th	e following:		
Wendy Hefley			
Name of Person	· •		
Incorp Services, Inc.			
Name of Firm/Company			
2360 Corporate Circle, Suite 400			
Address		≓E 55	
Henderson, NV 89074		NOV CAREA CAREA	
City/State and Zip Code		35	
processing@incorp.com			m
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:		9 32 77 E	
Incorp Services, Inc./Wendy Hefley at (702	866-2500 ext 6601	** N	
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.0115, Florida Statutes, the	undersigned,	
Incorp Services,	Inc.	, hereby resigns as	
	Name of Registered Agent	,,,,	
Registered Agent for	SUN BAY WINTER PARK LLC		_
	Name of Limited Liability Company		_
L11000107440			
Document 1	Number, if known		
A copy of this resigna	tion was mailed to the above listed limited liah	oility company at its last known addres	s.
The agency is termina	ted and the office discontinued on the 31st day	y after the date on which this statement	is filed.
If signing on behalf of	Signature of Rosigning A	SECRET ALLAHA	75
	Wendy Hefley for Incorp Services,	Inc. SSA	
	Typed or Printed Name		9
	Authorized Representative	正め	金り
	Capacity	5류 -	<u>ၾ</u> ယ

\$ 85.00 \$ 25.00

Active limited liability company
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