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(Requestor's Name)					
(Requestor's Name) 2222 Ponce De Leon Blud (Address) Penthause (Address)					
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RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 608.41	6(2) or 608.509, Florida	a Statutes, the undersi	gned,		
Mary Los	Ledon Name of Registered Ag	· · · · · · · · · · · · · · · · · · ·	, hereby resigns as			
Registered Agent for	Wisscoc	4				
	Name of Li	imited Liability Company		 ,		
L120000 Document No	11808 umber, if known					
A copy of this resignation	on was mailed to the	above listed limited lia	ibility company at its l	ast known address.		
		ontinued on the 31st da		ich this statement is filed.		
If signing on behalf of a	•					
	Mary Lou Rodon					
Typed or Printed Name				FIL UG 28 CTARY HASSE		
Registered Agent						
		Capacity		PH 12: 52 OF STATE E, FLORDA		
	FILING \$ 85.00 \$ 25.00	G FEES; Active limited liabi Administratively di withdrawn limited	ility company issolved/ voluntarily o liability company	dissolved/		

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