

Division of Corporations

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112 000076231

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.
Account Number : 075077001702
Phone : (407) 841-1200
Fax Number : (407) 423-1831

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

Email Address: _____

LLC REGISTERED AGENT RESIGNATION
VILLABAR CHICKASAW, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

T. CLINE

JAN 18 2019

EXAMINER

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2019 JAN 17 PM 12:07

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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 Villabar Chickasaw, LLC _____

Name of Limited Liability Company

L12000076221 _____

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: _____

Signature of Resigning Agent

If signing on behalf of an entity:

Vicki L. Berman _____

Typed or Printed Name

Vice President of Sole Member _____

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\$ 25.00	Administratively dissolved/voluntarily dissolved/ withdrawn limited liability company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 (2/14)

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