

U12000078278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FILED

# CFRA, LLC

A Subsidiary of CARLTON FIELDS JORDEN BURT

## Registered Agent Services

100 S. Ashley Drive | Suite 400

Tampa, Florida 33602

P. O. Box 3239 | Tampa, Florida 33601-3239

813.229.7000 | fax 813.229.4133

February 4, 2014


Division of Corporations  
P. O. Box 6327  
Tallahassee, Florida 32314

**Re: RESIGNATION OF REGISTERED AGENT –  
EURO-PAR INVESTMENTS, LLC  
BIS-CANE PROPERTIES, LLC  
ROWAYTON CAPITAL, LLC  
FI-FOIL OF FLORIDA, INC.  
GFP HOLDING CORPORATION, INC.  
SG MIRASOL II, LLC  
ISLAND ONE ACQUISITION, LLC  
ISLAND ONE HOLDINGS, LLC  
NUTRITION CFL, LLC  
LASALLE ENTERPRISES, LLC  
FIRST LAND ACQUISITION, INC.**

Gentlemen:

Please find enclosed Resignation of Registered Agent forms for the above referenced entities. Also enclosed is Carlton Fields Jordan Burt Check No. 44238 totaling \$485.00 for the filing fees for these entities.

Very Truly Yours,

  
Joyce H. Bentubo  
Secretary

JFB/ylc  
Enclosures

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

**CFRA, LLC**

\_\_\_\_\_, hereby resigns as  
Name of Registered Agent

Registered Agent for **ROWAYTON CAPITAL, LLC**

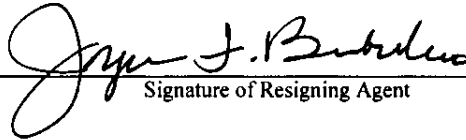
\_\_\_\_\_  
Name of Limited Liability Company

**L12000078278**

\_\_\_\_\_  
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:

**JOYCE F. BENTUBO**

\_\_\_\_\_  
Typed or Printed Name

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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