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EXAMINER

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(6(2) or 608.509, Florida Statutes, the undersigned,	
John O'Malley	, hereby resigns as	
Name of Registered Agen	ent	
Registered Agent for DICARLO ENE	RGY PRODUCTIONS, LLC	
Name of Lim	nited Liability Company ,	
L12000101970		
Document Number, if known		
\	ontinged on the 31st day after the date on which this statement is file	ed.
	Typed or Printed Name Capacity Capacity Capacity SER FLOR STATE OR STAT	ED

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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