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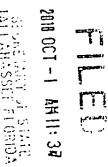
(Requestor's Name)
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O REI 10F.

COVER LETTER

BARONS TROUT LLC		
SURIFCT	f Limited Liability	Company
DOCUMENT NUMBER: L120001525	95	
The enclosed Resignation of Registered Ag for filing.		Liability Company and fee are submitted
Please return all correspondence concerning	g this matter to th	ne following:
NANCY B. STEWART		
Name of Person		-
GLOBAL CORPORATE SERVICES, IN	NC.	218 OCT
Name of Firm/Company		
7920 ROYAL LACE TERRACE		SS - 1
Address		
LAKE WORTH, FL 33467		2)
City/State and Zip Code		- -
tax@delawarecorp.net		
E-mail address: (to be used for future annual r	eport notification)	-
For further information concerning this ma	tter, please call:	
Phyllis Jacobs	561	968-6611
Name of Person	Area Code	Daytime Telephone Number
Enclosed is a check made payable to the Fl liability company or \$25.00 for an administ liability company.	orida Departmen tratively dissolve	t of State for \$85.00 for an active limited ed, voluntarily dissolved or withdrawn limited
MAILING ADDRESS:	STRE	ET ADDRESS:
Registration Section		ration Section
Division of Corporations		on of Corporations
P.O. Box 6327		Building
Tallahassee, FL 32314	2661 E	xecutive Center Circle

Tallahassee, FL 32301

TO: Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115, Florida Statutes, the undersi	gnea.	
Global Corporate	Services, Inc.	nereby resigns as	
	Name of Registered Agent	-	
	BARONS TROUT LLC		
Registered Agent for _			-
	Name of Limited Liability Company		_·
L12000152595			
Document N	lumber, if known		
A copy of this resignat	ion was mailed to the above listed limited liability co	ompany at its last known address	
The agency is terminat	ed and the office discontinued on the 31st day after t	he date on which this statement i	is filed.
	Many B. Stew Signature of Resigning Agent	at District	
If signing on behalf of	an entity:		-
	GLOBAL CORPORATE SERVICES, INC). Him	~~~
	Typed or Printed Name REGISTERED AGENT		A
	Capacity		S S

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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