L130000 94674

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COVER LETTER

SUBJECT: THE AMERICAN FISHERMAN LLC Name of Limited Liability Company DOCUMENT NUMBER: L13000094674 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the following: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 101 North Brand Blvd. 11th Floor Address Glendale, CA 91203 City/State and Zip Code raresignations@legalzoom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:) 773-0888 x3951 Kasandra Lund Area Code Daytime Telephone Number Name of Person Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company. MAILING ADDRESS: STREET ADDRESS:

Registration Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

INHS17 (2/14)

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

TO:

Registration Section
Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.0115, Florida Statutes, the under	signed.
United States Corporation Agents, Inc.		, hereby resigns as
	Name of Registered Agent	
Registered Agent for_	THE AMERICAN FISHERMAN LLC	
	Name of Limited Liability Company	<u></u> ,
L13000094674		
Document 3	Number, if known	
A copy of this resigna	tion was mailed to the above listed limited liability o	ompany at its last known address.
	Signature of Resigning Agent	
If signing on behalf of an entity:		76
	Cheyenne Moseley	
	Typed or Printed Name	AHASSEE,
	Asst. Secretary for United States Corporation Agent	s. Inc.
	Capacity FILING FEES:	4 6: 07
	\$ 85.00 Active limited liability com \$ 25.00 Administratively dissolved	pany ed/voluntarily dissolved/

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn limited liability company