

**13002918823ABC7**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : A1A REGISTERED AGENT INC.  
Account Number : 120090000032  
Phone : (561) 792-2236  
Fax Number : (561) 202-8082

\*\*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  
ATC FITNESS FORT MYERS 2 LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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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

SUPERBIZ REGISTERED AGENT, INC.

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

Registered Agent for ATC FITNESS FORT MYERS 2 LLC

Name of Limited Liability Company:

L13000148930

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 upon the 31st day of October, 1946.

Timothy Hale Signature of Resigning Agent

If signing on behalf of an entity:

TINA MAKI

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**Typed or Printed Name**

DP

## Capacity

**FILING FEES:**

**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withdrawn limited liability company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:

Florida Department  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32334

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