# L14000093121

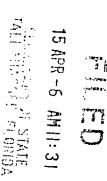
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(RM) 4-8-15

### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: DRY FIRE  Name of Limited Liability Company  DOCUMENT NUMBER: L 140000 93121		
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee ar for filing.	e subi	mitted
Please return all correspondence concerning this matter to the following:		
Christian Chicles Name of Person		
Ar control of the con	5	
Name of Firm/Company	₽	
3632 Upper Union Rd	8 - 6 A	x or make
Orlando FL 32814 City/State and Zip Code	AM   : 3	Secretary of the second
Richard. Gaskie Gmail. Com  E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Christian Chicles at (407) 257 1492  Name of Person Area Code Daytime Telephone Number	·	
		•. •

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,  Christian Chicles, hereby resigns as  Name of Registered Agent  Registered Agent for DRY FIRE, LLC
Name of Limited Liability Company
L140000 9312)  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
f signing on behalf of an entity:
Typed or Printed Name
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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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