

L14000129292

Florida Department of State
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To:

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

From:

Account Name : ROBERT LEE SHAPIRO, P.A.
Account Number : 119990000101
Phone : (561) 691-0059
Fax Number : (561) 691-0066

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Email Address: jemberton@rlshapirolaw.com

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LLC REGISTERED AGENT RESIGNATION ON TARGET PARTNERS, LLC

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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,

ROBERT LEE SHAPIRO, P.A.

, hereby resigns as

Name of Registered Agent

Registered Agent for **ON TARGET PARTNERS, LLC**

Name of Limited Liability Company

L14000129292

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

If signing on behalf of an entity:

ROBERT LEE SHAPIRO

Typed or Printed Name

PRESIDENT

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

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