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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : STEARNS WEAVER MILLER WEISSLER ALHADEFF SITTERSON <u>:-</u>

Account Number : I20960000135 : (305)789-3200 Phone : (305)789-4137 Fax Number

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LLC REGISTERED AGENT RESIGNATION EDUCA-TRAINING FLORIDA 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 unde	ersigned,			
Stearns Weaver Miller Weissler Alhadeff & Sitterson, PA		, hereby resigns as			
	Name of Registered Agent				
Registered Agent for ED	UCA-TRAINING FLORIDA LLC				_
	Name of Limited Liability Company				,
L14000133441					
Document Nun	nber, if known				
	n was mailed to the above listed limited liability				
The agency is terminated	and the office discontinued on the 31st day aft		eh-this st	atemer	nt is tiled.
	Signature of Resigning Agent		3-	2018	
If signing on behalf of ar	n entity:		1. (<u></u>	estra : ar .
	DAVID M. SEIFER		<u></u> مز رخ	-Z	(D)
	Typed or Printed Name		:::::	10	
	DIRECTOR AND SHAREHOLDER		-1· -1]*** -24	7
	Capacity		- 	Óΰ	
				<u></u>	
	\$ 85.00 Active limited liability \$ 25.00 Administratively dissol withdrawn limited liab	company lved/ voluntarily d ility company	lissolved	V	

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