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	Division of Corporations Electronic Filing Cover Sheet
	Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.
	(((H19000019624 3)))
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	To; Division of Corporation# Fax Number : (850)617-6383
	From; Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A. Account Numbor : 076077001702 Phone : (407)941-1200 Fax Number : (407)423-1831
	**Enter the email address for this business entity to be used for future
	Ensil Address:
	LLC REGISTERED AGENT RESIGNATION
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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Name of Registered Agent

Dean Mead Services, LLC

, hereby resigns as

Registered Agent for _

421 West Athens LLC

Name of Limited Liability Company

L14000179927

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.

Dean Mead Services, ELC By Signature of Resigning Agent

If signing on behalf of an entity:

Charles H. Egerton Typed or Printed Name

Vice President of Sole Member Capacity

- 85 00
- Active limited liability company Administratively dissolved/ voluntarily dissolved/ \$ 25.00

withdrawn limited liability company

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

INHS17 (2/14)

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