Florida Department of State

Vision 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.

(((H180000387193)))



H180000387193ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

CO

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

From:

Account Name : CARLTON FIELDS
Account Number : 076077000355
Phone : (813)223-7000
Fax Number : (813)229-4133

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: N/A

LLC REGISTERED AGENT RESIGNATION PETER A. RADICE CONSULTING, LLC

	
Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$85.00

REC = : VED
FEB 0 1 2018

H180000387193

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

CF REGISTERED	ons of section 605.0115, Flor AGENT, INC	: owneros;e 617	•. •	
	Name of Registered Agent	•	, hereby resigns as	
Registered Agent for	PETER A. RADICE CO	NSULTING, LL	С	. ·
	Name of Limited Lia	bility Company		:
L17000011859		••		
Document Nu	imber, if known			
A copy of this resignation	III was mailed to the shows to	irted limited Calaba	y company at its last known a	
I he agency is ferminated	Signat.	Dendellare of Resigning Agent	er the date on which this state	10 FED - 1
	JOYCE F. BENTUB		•	: <u>;;;</u> ;
	Typed or P SECRETARY	rinted Name		MI0:21
	FILING FEES: \$ 85.00 Active \$ 25.00 Admir	e limited liability of	ompany ed/ voluntarily dissolved/	

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

INHS17 (2/14)

H180000387193