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.

(((H21000198224 3)))



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

To:

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:___

LLC REGISTERED AGENT RESIGNATION MITTERSILL PROPERTIES LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

<u></u>	2
表情 注音	E T
1.名 1.名 四点	6 00 円。
22	全 》〇;
	ထ္ဆာ
74°	င္သား င္သား

Electronic Filing Menu Corporate Filing Menu

Help



H21000198224

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	s of section 605.0115,	Florida Statutes, the und	ersigned,			
CF REGISTERED AGENT, INC.		, hereby resigns as				
Name of Registered Agent						
Registered Agent for	MITTERSILL PRO	PERTIES LLC				_
	Name of Limite	ed Liability Company				 '
1.17000072452						
Document Nu	mber, if known	_				
A copy of this resignation	n was mailed to the abo	ove listed limited liability	y company at its læ	st known a	iddres	5.
The agency is terminated If signing on behalf of as	Joye	inued on the 3 st day aft J Signature of Resigning Agent	Lulio	h this state	ement	is filed.
	V	CE F. BENTUBO				
	Тур	ed or Printed Name ECTOR/SECRETARY			21	
		Capacity		製造	HAY	
	FILING F \$ 85.00	EES: Active limited liability (Administratively dissol	company		.8 W 81	
	\$ 25.00	withdrawn limited liab	ility company	SOUTH OF THE	ယ်	

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

INHS17 (2/14)

H21000198224