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.

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	AHASSEE	Division of Corporations Fax Number : (850)617-6383	FALLAHAS
	IAL	Account Name : Ala REGISTERED AGENT INC.  Account Number : 120090000832  Phone : (561)792-2236  Fax Number : (561)202-8682	SEEL FLOOR
		email address for this business entity to be used for future report mailings. Enter only one email address please.**	<b>607</b> [ -

## LLG REGISTERED AGENT RESIGNATION INTERIORS BY MARIA V LLC

A CONTRACT OF THE PARTY OF THE	
Certificate of Status	0
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Estimated Charge	\$25.00

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## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

SUPERBIZ REGISTERE	ED AGENT, INC.	
	Name of Registered Agent , hereby resigns as	
Registered Agent for IN	TERIORS BY MARIA V LLC	
	Name of Limited Liability Company	:
L17000122569		
Document Nu	imber, if known	
A copy of this resignation	on was mailed to the above listed limited liability company at its last known ad	dress.
The agency is terminated	d and the office discontinued on the 31st day after the date on which this stater	nent is filed
	Signature of Resigning Agent	
If signing on behalf of a	n entity:	
	TINA MAKI	2
	Typed or Printed Name DP	?021 AUG
	Capacity Cold	6 -
	FILING FEES: \$ \$5.00 Active limited liability company \$ 25.00 Administratively dissolved/voluntarily dissolved/ withdrawn limited liability company	11 AM 8: 54
	Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
INHS17 (2/14)		

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