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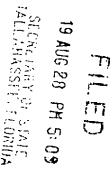
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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COVER LETTER

TO: Registration Section				
Division of Corporations				
CENTECT DEMONSOR INC				
SUBJECT: DUNDYCO17, LLC Name of Limited Liability Company				
, ,				
DOCUMENT NUMBER: L17000173881				
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
United States Corporation Agents, Inc.				
Name of Person				
Legalzoom.com, Inc.				
Name of Firm/Company				
101 North Brand Blvd. 11th Floor				
Address				
Glendale, CA 91203				
City/State and Zip Code				
raresignations@legalzoom.com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Kasandra Lund at (1800) 773-0888 x3951 Name of Person Area Code Daytime Telephone Number				

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn

MAILING ADDRESS:

limited liability company.

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ions of section 605.0115, Florida Statutes, the und	ersigned.
United States Corporation Agents, Inc.		, hereby resigns as
	Name of Registered Agent	
Registered Agent for_	DUNDYCO17, LLC	
	Name of Limited Liability Company	·
L17000173881		
	Number, if known	
A conv of this resigna	tion was mailed to the above listed limited liability	company at its last known address.
	Agnature of Resigning Agent	
If signing on behalf of	an entity:	
	Cheyenne Moseley	<u> </u>
	Typed or Printed Name	ents, Inc. 28
	Asst. Secretary for United States Corporation Age	ents, Inc. SST 28
	Capacity	PH 5: 09
	FILING FEES: \$ 85.00 Active limited liability co \$ 25.00 Administratively disso	•

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

withdrawn limited liability company

. . . .