

L18000054099

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M. SOLOMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DICKASON LAW GROUP, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L18000054099

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:

Donna M. Walters, FRP

Name of Person

Ausley & McMullen, P.A.

Name of Firm/Company

123 S. Calhoun Street

Address

Tallahassee, FL 32301

City/State and Zip Code

dwalters@ausley.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donna Marie Walters

Name of Person

at (850) 425-5457
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

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

2018 OCT 10 AM 10:13

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Sarah Butters

Name of Registered Agent

, hereby resigns as

Registered Agent for Dickason Law Group, LLC

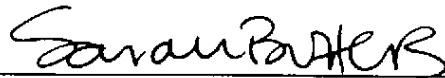
Name of Limited Liability Company

L18000054099

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.



Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

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

2009 OCT 10 AM 10:45