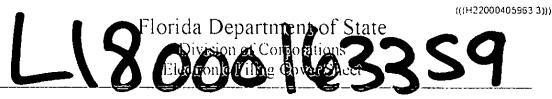
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Division of Corporations



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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.011.	5. Florida Statutes, the un	dersigned,	
Lifeboat Registered Agents, LLC Name of Registered Agent		, hereby resigns as	
Name of Lim	ited Liability Company	•	
L18000163359			
Document Number, if known	_ _		
A copy of this resignation was mailed to the a	bove listed limited liabili	ty company at its last known address.	
The agency is terminated and the office disco	ntinued on the 31st day a	fter the date on which this statement is filed.	
If signing on behalf of an entity:	Signature of Resigning Ager	Marie Contraction of the Contrac	
James J. Flick	•		
F Manager	yped or Printed Name	ZOZZ DEC	
**************************************	Unpacity		
FILING \$ 85.00 \$ 25.00	Active limited liability	lved/voluntarily dissolved/	

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

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