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COVER LETTER

TO: Registration Section
Division of Corporations

CRASEA MONKEYS WATER SPORTS L.L.C.

SUBJECT:

Name of Limited Liability Company

DOCUMENT NUMBER: L20000217748 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: Chelsea Chapman Name of Person Legaline Corporate Services, INC. Name of Firm/Company 10601 Clarence Dr Ste 250 Address Frisco, TX 75033-3867 City/State and Zip Code ra@legaline.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Chelsea Chapman

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Name of Person

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 605.0115, F	Florida Sta	tutes, the undersigned,
Legalinc Corporate Servi	ices, INC.	; 	, hereby resigns as
	Name of Registered Agent	- ; -	
Registered Agent for C	RASEA MONKEYS WAT	TER SPϕR'	TS L.L.C.
5 5 -			
	Name of Limited	Liability Co	ompany
L20000217748		_	
Document Nu	ımber, if known	1	
A copy of this resignation	on was mailed to the abov	ve listed li	mited liability company at its last known address.
The agency is terminate	d and the office disconting	nued on the	e 31st day after the date on which this statement is filed.
	Si	gnature of R	esigning Agent
If signing on behalf of a	in entity:		
Chelsea Chapman		ļ	
	Турес	d or Printed	Name E
On Behalf of Legaline Corporate Services, INC.		rvices, INC.	
		Capacity i	
	⊙ \$ 25.00 A	ctive limi dministra	ted liability company tively dissolved/ voluntarily dissolved/ limited liability company
	Di	vision of C P.O. Bo	Department of State and mail to: orporations x 6327 FL 32314

INHS17 (2/14)