Division of Corporations

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Division of Corporations

Fax Number : (850)617-6383

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Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Account Number : 076077001702 Phone : (407)841-1200

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LLC REGISTERED AGENT RESIGNATION AGB AUTOS, LLC

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Help 60, 13223

To:

(((H23000363438 3)))

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provi	sions of section 605.011	5, Florida Statutes, the und	ersigned,	
DEAN MEAD SERVI	ICES, LLC		_ , hereby resigns as	
	_ , hereby realights as			
Registered Agent for				
AGB AUTOS, LLC				
	Name of Lin	nited Liability Company		· · · · · · · · · · · · · · · · · · ·
L21000147130				
Document	Number, if known			
		above listed limited liability		
the agency is termin	ated and the office disco	ontinued on the 31st day after	er the date on which this st	atement is filed.
		Signature of Resigning Agent	\rightarrow	ب ع
If signing on behalf o	of an entity:		V	
	Stephen R. Looney, I	₹sq.		
	7	yped or Printed Name		
	Vice President of Sol	e Member		
		Capacity		.?
				. 🔾
	FILING \$ 85.00 \$ 25.00	Active limited liability of	/ed/ voluntarily dissolved/	
	Make checks payal	ole to Florida Department of Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	f State and mail to:	

INHS17 (2/14)