## CORPORDIO DO DO DO TOTO

September 17, 2001

RE: NATURAL SOLUTIONS, LLC.

(MD. DOM.)

Secretary of State Corporate Records Bureau Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

100004604061-3139 -09/21/01--01048--015 \*\*\*\*\*85.00 \*\*\*\*\*85.00

Dear Sir:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed are <u>1</u> checks in the amount of <u>\$85.00</u> each to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self-addressed envelope.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA/hm Enclosure OI SEP 21 PH 3: 02
SECRETARY OF STATE
TALLAHASSEE, FLORING

Mooder of or

111 Eighth Avenue New York, NY 10011 Tel. 212 894 8940 Fax 212 590 9180

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 608.416(2) or 608.509, Florida Statutes,	the undersigned,	
C T C	DRPORATION SYSTEM	, hereby resigns as	
	(Name of Registered Agent)	,,	
Registered Agent for _	NATURAL SOLUTIONS, LLC. (MD. DOM.)		
	(Name of Limited Liability Company)		
address.	ation was mailed to the above listed limited liability PO Box 5065 Lutherville, MD 21094-5065 Attn: Thomas M. Zizic lated and the office discontinued on the 31st day a  (Signature of resigning agent)  Tan entity:	UI SE SECRI ALLAI	
	Theresa Alfieri		
<del>-</del> .	(Typed or printed name)	·	
	Assistant Secretary	<b>→ *</b>	
	(Canacity)		

## FILING FEES:

\$ 85.00 Active Limited Liability Company \$ 25.00 Dissolved Limited Liability Company

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

INHS17(10/99)