M0000001163

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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02/21/07--01033--002 **100.00



107A-13079

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

C T CORPORATION SYSTEM

ن التي ا

(Name of Registered Agent)

PRESNELL C M, LLC. (KY. DOM.) Registered Agent for

(Name of Limited Liability Company)

M0000001163

(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.

(Sign; e of Resigning Agent)

If signing on behalf of an entity:

C T CORPORATION SYSTEM - Theresa Alfieri

(Typed or Printed Name) ASSISTANT SECRETARY

(Capacity)

FEES ING

85.00 \$ 25.00 Active limited liability company Administratively dissolved/voluntarily dissolved/ withdrawn limited liability company

hereby resigns as

FEB 21

41 :01 MY

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