M02000001649

•	
(Requestor's Name)	
(Address)	
(Address)	
· · ·	
(City/State/Zip/Phone	#)
` , , ,	,
PICK-UP WAIT	MAIL
(Business Entity Name	e)
(Document Number)	
Certified Copies Certificates of	of Status
	<u></u>
Special Instructions to Filing Officer:	
	į
•	

Office Use Only



800224850668

03/19/12--01025--019 **150.00

12 MAR 19 AM ID: 58
SECRET ARY OF STATE
SECRET ARY OF STATE

C. LEWIS

MAR 2 0 2012

EXAMINER

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 608.416(2) or 608.509, Florida S	tatutes, the undersigned,	景。 星
C T CORPORATIO	N SYSTEM	, hereby resigns as	200
	(Name of Registered Agent)	, norcoy resigns up	95.
Registered Agent for	MMA FINANCIAL EQUITY IV, LLC. (M	(ID.DOM)	
	(Name of Limited Liability Company)		,
M0200000	1649		
· (Document Nu	nmber, if known)		
A copy of this resigna	tion was mailed to the above listed limited liabil	ity company at its last know	vn address.
The agency is termina	ted and the office discontinued on the 31st day a	after the date on which this s	statement is filed.
If signing on behalf of	an entity:		
	C T CORPORATION SYSTEM - Theresa	Alfieri	
	(Typed or Printed Name) ASSISTANT SECRETARY		•
	(Capacity)	,	

FILING FEES: \$ 85.00 Activ \$ 25.00 Admi Active limited liability company
Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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