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Florida Department of State

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : HODGSON RUSS LLP Account Number : 072720000242

: (716)848-1371 : (716)849-0349 Phone Fax Number

REGISTERED AGENT RESIGNATION

BRAL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

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RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416(2) or 608.509, Florida Statutes,
the undersigned, HRAWG CORP., hereby resigns as Registered Agent for (Nerne of Registered Agent)
BRAL, LLC
(Name of Limited Liability Company)
M0300002584 (Document Number, if known)
A copy of this resignation was mailed to the above listed limited liability company at its last known address.
Ze se la companya di managana di managan
The agency is terminated and the office discontinued on the 31 st day after the date on which the statement is filed.
Se in the second se
(Signature of Resigning Agent)
(Signature of Resigning Agent)
·
If signing on behalf of an entity:
David M. Stark (Typed or Printed Name)
Vice President (Capacity)
Fee for filing this document: \$85.00 - Active limited liability company
\$25.00 - Administratively dissolved/voluntarily dissolved/
withdrawn limited liability compnay

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

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