

m03000003302

To: Page 3 of 5  
Division of Corporations

2016-09-16 10:45:39 CST

19542080845 From: Ranae McGraw

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160002308773)))



H160002308773ABC1

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.** Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (950) 205-3842  
Fax Number : (850) 878-5368

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

LLC REGISTERED AGENT RESIGNATION  
MICROSERV LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2016 SEP 16 PM 1:02

TALLAHASSEE FLORIDA

Electronic Filing Menu Corporate Filing Menu

S Warren  
SEP 19 2016

2016 SEP 16 AM 10:42  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA  
FILED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MICROSERV LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** M03000003302

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Helen Mac-Tran  
Name of Person

C T CORPORATION SYSTEM  
Name of Firm/Company

111 8th Avenue, 13th Floor  
Address

New York, New York 10011  
City/State and Zip Code

Helen Mac-Tran@wolterskluwer.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Helen Mac-Tran at ( 212 ) 590-9118  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

### STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

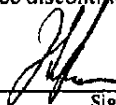
C T CORPORATION SYSTEM, hereby resigns as  
Name of Registered Agent

Registered Agent for MICROSERV LLC  
Name of Limited Liability Company

M03000003302  
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.

  
Signature of Resigning Agent

If signing on behalf of an entity:

C T Corporation System - Helen Mac-Tran  
Typed or Printed Name  
Assistant Secretary  
Capacity

FILED  
2016 SEP 16 A 10:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILING FEES:**

- \$ 85.00 Active limited liability company
- \$ 25.00 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