M0500000 1214

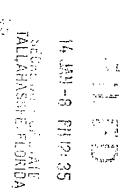
(Requestor's Name)					
(Address)					
(Address)					
,					
(City/State/Zip/Phone #)					
(Oity/State/Zip/Fillofie #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
.					

Office Use Only



000253537560

01/08/14--01009--007 **675.00



RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605		Florida Statutes, the undersigned,			
Nationa	Al Corporate Research, Ltd Name of Registered Agent	· , hereby	resigns as		
Registered Agent for	CABOT NORTH	UNIVERSITY DRIV	/E 23 LLC		_
	Name of Limited Liability	Company			_,
	0001214				
Document Nu	umber, if known				
A copy of this resignation	on was mailed to the above listed	limited liability company	y at its last known a	ddress	•
The agency is terminate	d and the office discontinued on		e on which this state	ement i	s filed.
	A. hulp	N			
	Signaturdo	f Resigning Agent			
If signing on behalf of a	n entity:				
	Andrew Lu	ndgren			
	Typed or Printe	ed Name	É		
	V.P., National Corpora	ate Research, Ltd.	_	- 857 10	
	Capacity		55.	ာ	fireAtions
			गि। गि।,न	਼ੋਹ	7,41
				2 38	######################################
	FILING FEES: \$ 85.00 Active li \$ 25.00 Adminis withdray	mited liability company tratively dissolved/ volu wn limited liability com	intarily dissolved/	PK 10: 35	tungs F

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