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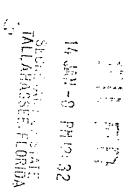
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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S. GITTHER 14N 10 2013

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605 Florida Statutes, the undersigned,				
Nationa	Name of Registered Agent	, hereby resig	gns as		
Registered Agent for	CABOT NORTH UNI	VERSITY DRIVE 2	9 LLC		
	Name of Limited Liability Comp	any			,
	0001220				
Document Nu	inber, if known				
A copy of this resignation	on was mailed to the above listed limite	ed liability company at i	ts last known a	ıddress	3.
The agency is terminated	d and the office discontinued on the 31	st day after the date on	which this state	ement	is filed.
	A. hulyw				
	Signature of Resig	ning Agent			
If signing on behalf of a	n entity:				
	Andrew Lundgr	en	() : _{€4}		
	Typed or Printed Nam	ne	ALL ALL	<u></u>	
	V.P., National Corporate R	lesearch, Ltd		10 mm 10 mm 10 mm	Ì
	Capacity		300	1	e e na la diciria
			指 (型)	ישר	
			~m ^.		or file Notate
	\$ 25.00 Administrative	l liability company ely dissolved/ voluntari nited liability company	ORIDA DA ly dissolved/	12:32	anger of

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