M0500001531

(Re	equestor's Name)			
(Address)				
(Address)				
(Ci	ty/State/Zip/Phone	e #) .		
PICK-UP	MAIT	MAIL		
(Bu	usiness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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B. KOHR

FEB 1 8 2009

EXAMINER



UCC FILING & SEARCH SERVICES, INC. 1574 Village Square Blvd Ste 100 Tallahassee, Florida 32309 (850) 681-6528

HOLD FOR PICKUP BY **UCC SERVICES** OFFICE USE ONLY

Februa	ιγ	17,	2009

(S):

2FKAICE2		CORPORATION NAME (S) AND DOCUMENT NUMBER (rvester Funding LLC
Filing Evidence ☑ Plain/Confirmatio	n Copy	Type of Document ☐ Certificate of Status ☐ Certificate of Good Standing ☐ Articles Only
□ Certified Copy		□ Certificate of Good Standing
		□ Articles Only
Retrieval Reque Photocopy Certified Copy	<u>st</u>	 All Charter Documents to Include Articles & Amendments Fictitious Name Certificate Other
NEW FILINGS		AMENDMENTS
Profit		Amendment
Non Profit	X	Resignation of RA Officer/Director
Limited Liability		Change of Registered Agent
Domestication		Dissolution/Withdrawal
Other		Merger
OTHER FILINGS		REGISTRATION/QUALIFICATION
Annual Reports		Foreign
Fictitious Name		Limited Liability
Name Reservation		Reinstatement
Reinstatement		Trademark
		Other

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,
UCC Filing & Search Services, Inc. hereby resigns as
(Name of Registered Agent)
Registered Agent for Spray Harvester Funding LLC
(Name of Limited Liability Company)
M0500001531
(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.
W. Edward Hand (Signature of Resigning Agent)
If signing on behalf of an entity:
W. Edward Hand
(Typed or Printed Name)
<u>President</u>
(Capacity)

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\$ 25.00 Administratively dissolved/voluntarily dissolved/withdrawn limited liability company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