## M05000005843

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				

Special Instructions to Filing Officer:

A. LUNT

NOV 16 2012

**EXAMINER** 

Office Use Only



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11/13/12--01045--001 \*\*435.00



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

Pursuant to the provisions of sec	tion 608.416(2) or 608.5	09, Florida Statutes, the unde	rsigned,
CF	FRA, LLC	, hereby resi	gns as
	Registered Agent	<u> </u>	<b>5</b>
Registered Agent for	sc	MIRASOL LLC	
	Name of Limited Liability	Company	,
M050000058	<del></del>		
A copy of this resignation was n	nailed to the above listed	limited liability company at i	ts last known address.
The agency is terminated and the	Jayu J. Signature of	the 31st day after the date on the 31st day after the 31st day	2012 REAT
	Joyce F. Be Typed or Printe Secreta Capacity	ed Name	3 PH 4: 37 SEE FLERIES

Active limited liability company
Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company \$ 85.00 \$ 25.00

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