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Special Instructions to Filing Officer:

A. LUNT

DEC - 7 2010

EXAMINER

Office Use Only



500188146455

12/06/10--01050--021 **260.00





RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| Pursuant to the provisio | ns of section 608.416(2) or 608.509. | , Florida Statutes, the undersigned | •• | |
|----------------------------|---------------------------------------|---------------------------------------|---|---------------------|
| | CFRA, LLC | , hereby resigns as | | |
| | Name of Registered Agent | , <u>,</u> | 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | |
| Registered Agent for | CHAN | MPIONS, L.L.C. | 2010 DEC | merg |
| | | | | erai. |
| | Name of Limited Liability Co | mpany | SSS TO | i Caracteristics |
| | | | <u> </u> | |
| M0600 | 0004676 | | AH WE | 3 |
| Document No | umber, if known | | 3 4 | |
| A copy of this resignation | on was mailed to the above listed lin | nited liability company at its last k | • • • | |
| The agency is terminate | d and the office discontinued on the | 31st day after the date on which t | his statement is filed | l. |
| 0 1 | Signature of Ro | - Butll | | |
| If signing on behalf of a | n entity: | | | |
| | Joyce F Bent | tubo | | |
| | Typed or Printed N | | | |
| | Secretary | 1 | | |
| | 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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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