

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H100001129263)))



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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : NATIONAL REGISTERED AGENTS, INC.
Account Number : 120030000062
Phone : (609) 716-0300
Fax Number : (609) 716-0820

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC REGISTERED AGENT RESIGNATION
CSGA, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

J. BRYAN

MAY 11 2010

EXAMINER

5/10/2010

<https://efile.sunbiz.org/scripts/cfilcovr.exe>

RECEIVED
10 MAY 10 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
10 MAY 10 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M07000003751
(H100001129263)

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,

NRAI Services, Inc.

(Name of Registered Agent)

, hereby resigns as

Registered Agent for CSGA, LLC

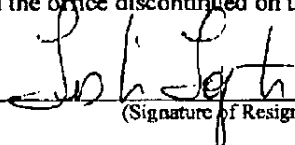
(Name of Limited Liability Company)

M07000003751

(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.


(Signature of Resigning Agent)

If signing on behalf of an entity:

Leslie Lofton

(Typed or Printed Name)

Assistant Secretary

(Capacity)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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withdrawn limited liability company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