Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : HENDRY, STONER & BROWN, P.A.

Account Number : I20000000241 : (407)843-5880 Phone : (407)425-7905 Fax Number

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

Email Address: Sbrown a Lawfort

LLC REGISTERED AGENT RESIGNATION SUPER COLOR DIGITAL, LLC

Certificate of Status	0
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COVER LETTER

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TO: Registration Section Division of Corporations

SUBJECT: SUPER COLOR DIGITAL, LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: M07000003836	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne following:
G. Steven Brown, Esquire	
Name of Person	•
Hendry, Stoner & Brown, P.A.	
Name of Firm/Company	•
604 Courtland Street, Suite 326	
Address	
Orlando, FL 32804	
City/State and Zip Code	•
sbrown@lawforflorida.com	
E-mail address: (to be used for future annual report notification)	-
For further information concerning this matter, please call:	
G. Steven Brown 407	843-5880
Name of Person Area Code	Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 603.0113, Fig	orida Statutes, the under	signed,			
Hendry, Stoner & Brown, P.A.			, hereby resigns as			
	Name of Registered Agent					
Registered Agent for _	Super Color Digital, LL	_C				
						_,
	Name of Limited L	inbility Company				
M07000003836						
Document N	lumber, if known					
A copy of this resignat	tion was mailed to the above	listed limited liability	company at its last	known a	.ddress	•
The agency is terminat	ted and the office discontinu	ed on the 31st day afte	r the date on which	this stat	ement	is filed
	I Stim	Brown				
	Sign	natilre of Resigning Agent		 	2018	
If signing on behalf of	an entity:			تاريخ	نت. حد	ажиј ј
	G. Steven Brown			100 m	JUN 13	Sharken)
	Typed	or Printed Name			ယ	
	Vice President			الف د لور		Trans.
	Cı	pncity			99	(-3-44 ₂ -
					e ()	. •
	FILING FEE	<u>es:</u>				
	\$ 85.00 Ac \$ 25.00 Ac w	ctive limited liability of Iministratively dissolve ithdrawn limited liabil	ompany ed/ voluntarily dis: ity company	solved/		

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

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