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(((H180000101693)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (512)418-6949 Fax Number : (954)208-0845

**Enter	the	email a	address	for	this	busin	ess	entity	to	be (	used	for	fut	ure:
an	nual	report	mailin	gs.	Enter	only	one	email	add	ress	ple	ase.	**	

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## LLC REGISTERED AGENT RESIGNATION SONITROL FRANCHISE COMPANY, L.I.C.

Certificate of Status	0
Certified Copy	1
Page Count	03
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## **COVER LETTER**

TO:	Registration Section Division of Corporations			1
SUB	JECT: Sonitrol Franchise Company, L.L.C	•		
	Name of Limited	Liability (	Company	<u></u>
DOC	UMENT NUMBER: M08000005384			<u> </u>
The e	enclosed Resignation of Registered Agent for a ling.	Limited l	Liability Compa	any and fee are submitted
Pleas	e return all correspondence concerning this ma	atter to the	following:	
Kate	e Seidita			
	Name of Person			
СТ	CORPORATION SYSTEM		.**	
	Name of Firm/Company			
111	8th Avenue, 13th Floor			1
	Address			
New	York, New York 10011			
	City/State and Zip Code	<del></del>		
there	esa.alfieri@wolterskluwer.com			
	E-mail address: (to be used for future annual report not	fication)		
For f	urther information concerning this matter, plea	ase call:		
Kate	e Seidita 2	12	894-8526	
	Name of Person A	rea Code	894-8526 Daytime Teleph	one Number
Encle liabil liabil	osed is a check made payable to the Florida Delity company or \$25.00 for an administratively lity company.	epartment dissolved	of State for \$85 l, voluntarily dis	5.00 for an active limited ssolved or withdrawn limited
Regi Divi: P.O.	Stration Section sion of Corporations Box 6327 shassee, FL 32314	Registra Division Clifton 1 2661 Ex	T ADDRESS: ation Section in of Corporation Building secutive Center see, FL 32304-	Circle

INHS17 (2/14)

INHS17 (2/14)

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

			10 · · · · · · · · · · · · · · · · · · ·	
Pursuant to the provision	s of section 605.0115	5, Florida Statutes, the	e undersigned,	
CT CORPORATION	N SYSTEM		, hereby resigns as	٠.
	Name of Registered Agen	nt	, nereby resigns as	C): 60
Registered Agent for So	nitrol Franchise (	Company, L.L.C.		一 建
				· 6
	Name of Lim	ited Liability Company		
M08000005384		_	1	
Document Num	nber, if known			
A copy of this resignation	n was mailed to the a	bove listed limited lia	ability company at its last kno	own address.
If signing on behalf of an	entity: C T Corporation	Signature of Resigning A System - Kate Se Syped or Printed Name ant Secretary Capacity		
	FILING \$ 85.00 \$ 25.00 Make checks payat	FEES: Active limited liab Administratively d withdrawn limited	issolved/voluntarily dissolv Lability company  nent of State and mail to: ions	/ed/

:.....