11000006242

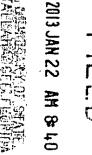
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	atur
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J. SAULSBERRY **EXAMINER**

JAN 29 2013

COVER LETTER

SUBJECT: PRIMCOGENT SOLUTIONS LLC		
Name of Limited Liability Company M444000000000000000000000000000000000		
DOCUMENT NUMBER: M11000006242		
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee ar for filing.	e submitted	
Please return all correspondence concerning this matter to the following:		
Rhonda Peirce		
Name of Person		
Capitol Services Registered Agent Department Name of Firm/Company		
800 Brazos, Suite 400		
Address	<i>-</i> → 2	
Austin, Texas 78701 City/State and Zip Code	2013 JAN 22	7
rpeirce@capitolservices.com	7.1	ΓŊ
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:	AM 80 4.0	*Income?*
Rhonda Peirce at (800) 345-4647		

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

Name of Person

Amendment Section Division of Corporations

TO:

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

STREET ADDRESS:

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

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions	of section 608.416(2)	or 608.509, Florida S	Statutes, the undersigned,	1		
	orporate Servi	ces, Inc.	, hereby resigns as			
N	lame of Registered Agent					
Registered Agent for						
	PRIMCOGE	NT SOLUTION	NS LLC			
	Name of Limite	ed Liability Company				
M110000	006242					
Document Numb	ber, if known	·				
A copy of this resignation	was mailed to the abo	ove listed limited liabi	lity company at its last ki	nown address.		
The agency is terminated a	and the office disconti	inued on the 31st day	after the date on which th	nis statement is fi	iled.	
_	Chler	Signature of Resigning Ag	gent			
If signing on behalf of an e	entity:			100	2	
_		eryl Roberts	······································		2013 JAN 22	
	**	ed or Printed Name		45 of 200	₽	1.]
_		President Capacity		<u> </u>	22	
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				PR .	01	
	FILING F \$ 85.00 \$ 25.00	EES: Active limited liabili Administratively diss withdrawn limited li	ty company solved/ voluntarily disso ability company	·lved/		

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Austin, Texas 78701 City/State and Zip Code	BASSAM.	2013 JAN 22	
rpeirce@capitolservices.com E-mail address: (to be used for future annual report notification)		AM 8≈ 1√0	C
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Return acknowledgment to:

