## m12000001052

(Re	equestor's Name)				
(Ad	ddress)				
(Ad	ddress)				
(Ci	ity/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL			
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SECRETARY OF STATE

MAR 2 1 2016

S MASON

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

Pursuant to the provisions of sec	tion 605.0115, Flori	da Statutes, the undersig	ned,		
Jeffrey F.	Registered Agent	, he	reby resigns as		
/ Name of	Registered Agent				
Registered Agent for ACC	DY LLC				<del></del>
	Name of Limited Liab	oility Company			
		·			
Document Number, if k	nown				
A copy of this resignation was m	nailed to the above li	sted limited liability con	npany at its last l	known add	iress.
The agency is terminated and the	office discontinued	on the 31st day after the	e date on which	this statem	nent is filed.
	Offrey Signate	re of Resigning Agent	····		
If signing on behalf of an entity:					
<u> </u>	Typed or I	Printed Name	<del></del>		•
	Сарас	city			
	\$ 25.00 Admi	e limited liability compinistratively dissolved/odrawn limited liability o	voluntarily disso	2916 Jan 10 10 10 10 10 10 10 10 10 10 10 10 10	
Make	checks payable to Fl	orida Department of Stat	e and mail to	3 13	
	Divisio	orida Department of Stat on of Corporations	25	<u>-</u>	
	P	.O. Box 6327 hassee, FL 32314	<b>9</b>	<sup>77</sup> CO	
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