Division of Corporations Electronic Filing Cover Sheet

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.

(((H15000151826 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORPORATING SERVICES FL

Account Number : 120050000052 Phone : (850)656-7956 Fax Number : (850)556-7953

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 GIGABIT FLORIDA, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

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No. 8581 P.

COVER LETTER

H15000151826 3

TO: Registration Section Division of Corporations		
SUBJECT: GIGABIT FLORIDA, LLC	Limited Liability	
	•	Company
DOCUMENT NUMBER: M1300000159		
The enclosed Resignation of Registered Agr for filing.	ent for a Limited	Liability Company and fee are submitted
Please return all correspondence concerning	this matter to th	c following:
DENELL SPROWL		
Name of Person		
INCORPORATING SERVICES, LTD.		
Name of Firm/Company		
3500 SOUTH DUPONT HIGHWAY		
Address		
DOVER, DE 19901		
City/State and Zip Code		
DSPROWL@INCSERV.COM		
E-mail address: (to be used for future annual re	port notification)	
For further information concerning this mat	ter, please call:	
DENELL SPROWL	302	531-0707
Name of Person	Area Code	Daytime Telephone Number
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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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

H150001518263

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.011	5, Florida Statutes, the under	rsigned,	
INCORPORATING	SERVICES, LTD).	, hereby resign	e 4 ¢
	Name of Registered Age	nt	, nereby resign	3 43
Registered Agent for	GIGABIT FLORIDA	A, LLC		
				<u>.</u>
	Name of Lim	ilted Liability Company		
M13000001598				
Document N	lumber, if known	_		
A copy of this resignat	ion was mailed to the	above listed limited liability	company at its	last known address.
The agency is terminate	_Qm	Intinued on the 31st day after	the date on wi	hich this statement is filed.
	AMY BALKE			
	ī	yped or Printed Name		
	ASSISTANT SE	CRETARY		
		Capacity		
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability co Administratively dissolve withdrawn limited liability	d∕ voluntarily	TALLAHASSEE, FLORIE
	Make checks payab	ole to Florida Department of S Division of Corporations	tate and mail to	» DE
		P.O. Box 6327		
		Tallahassee, FL 32314		