

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORPORATING SERVICES FL

Account Number : 120050000052

Phone Fax Number : (850)656-7956 : (850)656-7953

\*\*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 MARSH BUSINESS ADVISORS, LLC

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9/23/2014

TO: Registration Section

## **COVER LETTER**

H14000223735 3

Division of Corporations						
SUBJECT: MARSH BUSINESS ADVI						
Name DOCUMENT NUMBER, M130000057		ted Liability	Company			
The enclosed Resignation of Registered A for filing.		or a Limited	Liability Company a	nd fee are sub	mitted	
Please return all correspondence concerni	ng this	matter to th	e following:			
TUNISHA SCOTT						
Name of Person	W			JVI HS	<del></del>	
INCORPORATING SERVICES, LTD.				는 23	E SE	
Name of Firm/Company				2	- D - D - D - D - D - D - D - D - D - D	
3500 SOUTH DUPONT HWY				*****	(45 th )	
Address				<u> </u>	ë 1 €	
DOVER , DE 19901				GIBU 3 A	<u></u>	
City/State and Zip Code		· <del></del>		Þ		
RADIV@INCSEV.COM						
E-mail address: (to be used for future annual	report r	otification)				
For further information concerning this m	atter, p	lease call:				
TUNISHA SCOTT	nt (		531-0855			
Name of Person	#! 1	Area Code	Daytime Telephone	Number		
Enclosed is a check made payable to the I liability company or \$25.00 for an admini liability company.	lorida strativo	Department ly dissolve	of State for \$85.00 f d, voluntarily dissolve	or an active lir ed or withdraw	nited ⁄n limited	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		Registra Division Clifton	ET ADDRESS: ration Section on of Corporations n Building Executive Center Circle			
Tallahassee, FL 32314			ssee, FL 32301	8		

INHS17 (2/14)

H140002237353

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

Pursuant to the provisions of section 605.0115, Plorida State	nee the undersigned	70 E	ယ
INCORPORATING SERVICES, LTD.	_	:6.01 = 1.00	
Name of Registered Agent	hereby resigns as	77 77 (7 <sub>2</sub>	<b>E</b> (
		長男	5: 5
Registered Agent for			
MARSH BUSINESS ADVISORS, LLC		129	
Name of Limited Lizbility Cor	pany		
M13000005791			
Document Number, if known			
Document Number, if known  A copy of this resignation was mailed to the above listed lim  The agency is terminated and the office discontinued on the			
A copy of this resignation was mailed to the above listed lim	31st day after the date on which th		
A copy of this resignation was mailed to the above listed lim  The agency is terminated and the office discommuned on the  Signature of Re	31st day after the date on which th		
A copy of this resignation was mailed to the above listed lim  The agency is terminated and the office discontinued on the  Signature of Re	31st day after the date on which th		
A copy of this resignation was mailed to the above listed lim  The agency is terminated and the office discontinued on the  Signature of Re	31st day after the date on which the		
A copy of this resignation was mailed to the above listed lim  The agency is terminated and the office discontinued on the  Signature of Re  If signing on behalf of an entity:  TUNISHA SCOTT	31st day after the date on which the		

\$ 25.00 Active limited liability company
\$ 25.00 Administratively dissolved/voluntarily dissolved/
withdrawn limited liability company

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