# M1400008278

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D. SCOTT JAN 1 8 2017

### **COVER LETTER**

TO: Registration Section Division of Corporations

SUBJECT: UNIVERSITY-HONORE, LLC		
Name of Limited Liability	Company	-
DOCUMENT NUMBER: M14000008278		_
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee a	re submitted
Please return all correspondence concerning this matter to the	ne following:	
Emily Smith		
Name of Person	•	
Paracorp Incorporated		
Name of Firm/Company	•	
PO Box 160568		
Address	•	
Sacramento, CA 95816	, اس	o <b>∸</b>
City/State and Zip Code		69 - 1
		迎皇下
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		700 70
Sharon Cooke 800	533-7272	044 35
Name of Person Area Code	Daytime Telephone Number	- "J.F"

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

Pursuant to the provisions	of section 605.011:	5, Florida Statutes, the unde	rsigned,	
Paracorp Incorporated			, hereby resigns as	
	ame of Registered Ager		,	
Registered Agent for UNI	VERSITY-HON	IORE, LLC		
	Name of Lim	ited Liability Company	,	
M14000008278				
Document Numb	er, if known			
A copy of this resignation	was mailed to the a	above listed limited liability	company at its last known address.	
The agency is terminated a	and the office disco	ntinued on the 31st day afte	r the date on which this statement is filed.	
_	Sha	Signature of Resigning Agent		
If signing on behalf of an e	entity:			
S	Sharon Cooke		-1.07 <b>-1</b>	
_	Т	yped or Printed Name		
<u>A</u>	Assistant Secretary, Paracorp Incorporated		ated E	
_		Capacity	50E T IN	
			是 是 三	
		DODO	75.72	
	<b>FILING</b> \$ 85.00 \$ 25.00	Active limited liability of Administratively dissolve withdrawn limited liability	ompany ed/voluntarily dissolved/	

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

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