

10/18 Oct. 18. 2017 10:20AM

Division of Corporations

No. 0793

P. 1

Florida Department of State
Division of Corporations
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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)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
NEW PREMIER MANAGEMENT LLC**

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

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17 OCT 18 AM 9:00
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TALLAHASSEE, FLORIDA

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S. WARREN

OCT 19 2017

Oct. 18. 2017 10:21AM

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700 2253

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NEW PREMIER MANAGEMENT LLC

Name of Limited Liability Company

DOCUMENT NUMBER: M16000004756

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PHYLLIS D. BROWN

Name of Person

INCORPORATING SERVICES, LTD.

Name of Firm/Company

3500 SOUTH DUPONT HIGHWAY

Address

DOVER, DE 19901

City/State and Zip Code

RADIV@INCSERV.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PHYLLIS D. BROWN

Name of Person

at (800) 346-4646

Area Code Daytime Telephone Number

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

INCORPORATING SERVICES, LTD.

, hereby resigns as

Name of Registered Agent

Registered Agent for NEW PREMIER MANAGEMENT LLC

Name of Limited Liability Company

M16000004756

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Phyllis D. Brown

Signature of Resigning Agent

If signing on behalf of an entity:

PHYLLIS D. BROWN

Typed or Printed Name

ASSISTANT SECRETARY

Capacity

FILING FEES:

\$ 85.00	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

INHS17 (2/14)

FILED
17 OCT 18 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA