Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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Email Address:

## LLC REGISTERED AGENT RESIGNATION PATRIOT PREPLLC

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

Pursuant to the provisions of section 605.0115, Florida Statutes, th	e undersigned.
REGISTERED AGENTS. INC.	, hereby resigns as
Name of Registered Agent	
Registered Agent for PATRIOT PREP LLC	
Name of Limited Liability Company	
M23000009427	
Document Number, if known	
A copy of this resignation was mailed to the above listed limited li-	ability company at its last known address.
The agency is terminated and the office discontinued on the 31st d	ay after the date on which this statement is filed.
Signature of Resigning	Agent 2
If signing on behalf of an entity:	
David Roberts	i i i i i i i i i i i i i i i i i i i
Typed or Printed Name	
Assistant Secretary Capacity	y

FILING FEES:
5 85.00 Active limited liability company
S 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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 Tallahassec, FL 32314