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Longwood	F1 32750 Zip Phone #	-08/15/0801090003
City/State/	Zip Phone #	
		Office Use Only
CORPORATION	NAME(S) & DOCUMENT N	TUMBER(S), (if known):
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4. (Corp Walk in Mail out NEWFILINGS Profit NonProfit Limited Liability Domestication Other	Pick up time Will wait Photocop AMENDMENTS Amendment Resignation of R.A., Officer/ Change of Registered Agent Dissolution/Withdrawal Merger	(Document #) Certified Copy Certificate of Status
4. (Corp Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report	Pick up time Will wait Photocop AMENDMENTS Amendment Resignation of R.A., Officer/ Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/	(Document #) Certified Copy Certificate of Status SECRETARY OF STATE Director Director On AUG 14 PM 11: 09
4	Pick up time Will wait Photocop AMENDMENTS Amendment Resignation of R.A., Officer/ Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/ QUALIFICATION Foreign	(Document #) Certified Copy Certificate of Status SECRETARY OF STATE Director Director On AUG 14 PM 11: 09
4. (Corp Walk in Mail out NEWFILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report	Pick up time Will wait Photocop AMENDMENTS Amendment Resignation of R.A., Officer/ Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/ QUALIFICATION Foreign Limited Partnership	(Document #) Certified Copy Certificate of Status
4. (Corp Walk in Mail out NEW-FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	Pick up time Will wait Photocop AMENDMENTS Amendment Resignation of R.A., Officer/ Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/ QUALIFICATION Foreign Limited Partnership Reinstatement	(Document #) Certified Copy Certificate of Status SECRETARY OF STATE Director Director On AUG 14 PM 11: 09
4. (Corp Walk in Mail out NEW-FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	Pick up time Will wait Photocop AMENDMENTS Amendment Resignation of R.A., Officer/ Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/ QUALIFICATION Foreign Limited Partnership	(Document #) Certified Copy Certificate of Status SECRETARY OF STATE Director Director On AUG 14 PM 11: 09

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions	of section 608.416(2) or	608.509, Florida Statu	tes, the und	lersigned	,	
	DOEY LYN SWAT	ت ر	, hereb	y resigns	as	
	Name of Registered Agent)	<u>.</u>	,	,		
Registered Agent for	SILVERGIZEEN	USA , LLC		198-	156	
	(Name of Limited Lie	ability Company)	·			
A copy of this resignatio address.	n was mailed to the abo	ve listed limited liabil	lity compar	ny at its	last l	known
The agency is terminated statement is filed.	l and the office disconti	nued on the 31st day	after the	date on	whic	h this
— If signing on behalf of an	(Signature of	Cesigning agent)	<u>.</u>	TALI	00	
				AHASS	≥ 00 -	T
_		printed name)		Y OF ST	H PH	ILED
	(Сар	acity)		STATE	PH II: 09	

FILING FEES:

\$ 85.00 Active Limited Liability Company \$ 25.00 Dissolved Limited Liability Company

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