

P12000091573

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM
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**REGISTERED AGENT RESIGNATION
NIRVANA SOUTH, INC.**

Certificate of Status	0
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APR 20 2016

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R. M. Resign.

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NIRVANA SOUTH, INC.

Name of Limited Liability Company

DOCUMENT NUMBER: P12000091573

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:

Theresa Alfieri

Name of Person

NRAI SERVICES, INC.

Name of Firm/Company

111 8th Avenue, 13th Floor

Address

New York, New York 10011

City/State and Zip Code

theresa.alfieri@wolterskluwer.com

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

For further information concerning this matter, please call:

Theresa Alfieri

Name of Person

at (212)

Area Code

894-8516

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, NRAI SERVICES, INC.

(Name of Registered Agent)

hereby resigns as Registered Agent for NIRVANA SOUTH, INC.

(Name of Corporation)

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(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation 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.


(Signature of Resigning Agent)

If signing on behalf of an entity:

NRAI SERVICES, INC.-Theresa Alfieri

(Typed or Printed Name)

ASSISTANT SECRETARY

(Capacity)

FILED
16 APR 19 AM 8:53
CLERK OF STATE
TALLAHASSEE, FLORIDA

Fee for filing this document:

\$87.50 - Active Corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

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