

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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

From: Account Name : CARLTON FIELDS  
Account Number : 076077003355  
Phone : (813) 223-7000  
Fax Number : (813) 223-4133

**\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**

Email Address: \_\_\_\_\_

REGISTERED AGENT RESIGNATION  
LEVIRICH, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$87.50

RECEIVED

14 JAN -3 PM 2:00

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
2014 JAN -3 AM 10:31  
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TALLAHASSEE, FLORIDA

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1/6/14

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**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

2014 JAN -3 AM 10:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, CFRA, LLC

(Name of Registered Agent)

hereby resigns as Registered Agent for LEVIRICH, INC.

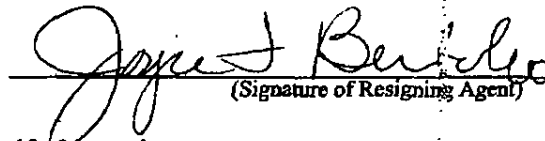
(Name of Corporation)

P96000064207

(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:

JOYCE F. BENTUBO

(Typed or Printed Name)

SECRETARY

(Capacity)

**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withdrawn corporation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 632  
Tallahassee, FL 32314

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