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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: CLC Management, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P970000854/12

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Corinne P. McClure, Senior Paralegal

(Name of Person)

McGuireWoods LLP

(Name of Firm/Company)

50 North Laura Street, Suite 3300

(Address)

Jacksonville, FL 32202

(City/State and Zip Code)

For further information concerning this matter, please call:

Corinne McClure

,,904 \,798-32

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607:050	
Florida Statutes, the undersigned. RAX Co	(Name of Registered Agent)
hereby resigns as Registered Agent for CLO	
hereby resigns as Registered Agent for	(Name of Corporation)
P97000085412	
(Document Number, if known)	
A copy of this resignation was mailed to the a	above listed corporation at its last known address.
The agency is terminated and the office disco this statement is filed.	ontinued on the 31st day after the date on which
<u> Signature</u> (Signature	O. Jaylor e of Resigning Agent)
If signing on behalf of an entity:	ਜ਼ ਜ਼
Lisa O. Taylor	TION TALL THE
(Typed	or Printed Name)  AND
President	
	(Capacity)
Division P.	rida Department of State and mail to: n of Corporations O. Box 6327 passee, FL 32314