

COVER LETTER

TO: Registration Section
Division of Corporations

The enclosed Resignation of Registered Agent and fee are submitted for resignation from more than one limited liability company that each has been dissolved, either voluntarily, administratively, or by court action, for a continuous period of 10 years or longer. *See Section 605.0115(6)(a), Florida Statutes.*

Please return all correspondence concerning this matter to the following:

Name of Person

Name of Firm/Company

Address

City/State and Zip Code

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

For further information concerning this matter, please call:

Name of Person _____ at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$25.00.

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FROM MORE THAN ONE LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115(6)(a), Florida Statutes, the undersigned,

_____,
Name of Registered Agent

hereby resigns as Registered Agent from more than one limited liability company that each has been dissolved, either voluntarily, administratively, or by court action, for a continuous period of 10 years or longer. See attached page to list the name, date dissolution became effective and document number for each respective limited liability company.

After filing this statement of resignation with the Division of Corporations, the resigning individual must promptly mail a copy of either the composite statement of resignation or a separate notice of resignation for each respective limited liability company, in each case using the respective mailing address of the respective limited liability company that then appears in the records of the department.

The agency is terminated upon the earlier of:

- (a) The 31st day after the department files the statement of resignation; or
- (b) When a statement of change or other record designating a new registered agent is filed by the department.

Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

FILING FEES:

\$ 25.00 for more than one limited liability company that each has been dissolved, either voluntarily, administratively, or by court action, for a continuous period of 10 years or longer.

Make checks payable to Florida Department of State and mail to:

**Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**

Name of Limited Liability Company

Date of Dissolution

Document Number