

L05 000035325

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

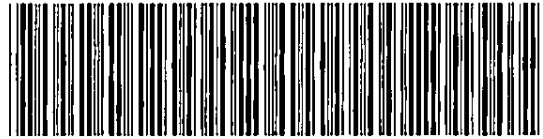
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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8/1/2025

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gatorbait of Florida, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L05000035325

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:

Stephen Bennett

Name of Person

Gatorbait of Florida, LLC

Name of Firm/Company

1960 Bayshore Blvd.

Address

Dunedin, FL 34698

City/State and Zip Code

stephen.bennett@snodm.com

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

For further information concerning this matter, please call:

Stephen Bennett

Name of Person

at (

Area Code

(727) 415-2434

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Richard T. Heiden, P.A.
ATTORNEYS AT LAW

Richard T. Heiden * + ☉ ▪ ☌ • ☉
Email: richardheiden@rthlaw.com

2723 State Road 580
Clearwater, FL 33761
Telephone: (727) 771-7888
Facsimile: (727) 771-7899

Licensed to Practice:

All Florida State Courts*
Middle District of FL-Fed Courts+
Southern District of FL-Fed Courts☉
United States District Court - 11th Circuit▪
United States Supreme Court •
Certified Circuit Court Mediator ☌
Arbitrator ☉

May 22, 2025

VIA REGULAR U.S. MAIL TO:

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

RE: Resignation of Registered Agent - 4 Corporations
Our File #20-2493

Dear Sir or Madam:

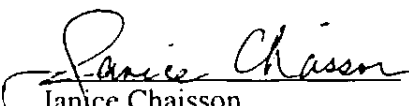
I enclose herewith four (4) Resignations of Registered Agent for filing regarding the following corporations:

1. **Gator Bait Group, LLC** & check #15922 in the amount of \$87.50;
2. **Gatorbait of Florida, LLC** & check #15925 in the amount of \$35.00;
3. **Simplified Software Design, LLC** & check #15924 in the amount of \$87.50
4. **Simplified Software Development, L.L.C.** & check #15923 in the amount of \$87.50.

Thank you for your assistance with these resignations. Should you have any questions please let me know.

Sincerely,

RICHARD T. HEIDEN, P.A.


Janice Chaisson
Paralegal

/jec
cc: File



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 23, 2025

RICHARD T HEIDEN, ESQUIRE
2723 STATE ROAD 580
CLEARWATER, FL 33761

SUBJECT: GATORBAIT OF FLORIDA, LLC
Ref. Number: L05000035325

We have received your document for GATORBAIT OF FLORIDA, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 525A00016223

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Richard T. Heiden, Esq. _____, hereby resigns as

Name of Registered Agent

Registered Agent for Gatorbait of Florida, LLC

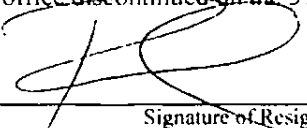
Name of Limited Liability Company

L05000035325

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company 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:

Typed or Printed Name

Capacity

2025 JUN -7 PM 5:36

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/voluntarily dissolved/
withdrawn limited liability company

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