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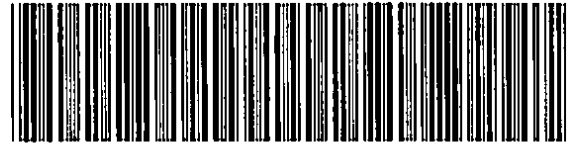
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2019 APR 29 PM 5:35

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J. PRATT



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 8, 2019

KRISHN ANBNEK ← *Kristin Antonek*
18942 NORTH DALE MABRY, #101
LUTZ, FL 33548

SUBJECT: THE GROWTH CENTER PLLC
Ref. Number: L06000018041

We have received your document for THE GROWTH CENTER PLLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED PARTNERSHIP, but your entity is a LLC. 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) 245-6051.

Stacy Prather
Regulatory Specialist III

Letter Number: 719A00007037

RECEIVED
APR 29 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Growth Center
Name of Limited Liability Company

DOCUMENT NUMBER: L06000018041

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:

Thomas Anbæk
Name of Person

The Growth Center
Name of Firm/Company

18942 North Dale Mabry #101
Address

Lutz FL 33548
City/State and Zip Code

kristin@thegrowthcenter.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristin Anbæk at (813) 949-7114
Name of Person Area Code 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Thomas Andonick

Name of Registered Agent

, hereby resigns as

Registered Agent for

The Growth Center

Name of Limited Liability Company

LO6000018041

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.

Thomas Andonick

Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

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2019 APR 29 PM 5:35
TALLAHASSEE, FL

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