

L160000019018

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

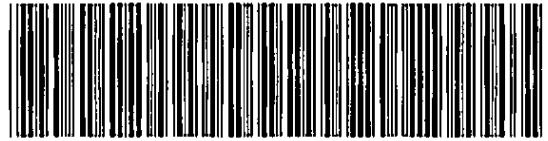
(Business Entity Name)

(Document Number)

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2022 FEB 10 AM 10:31
STATE OF MISSISSIPPI

FILED

C. BRUMBLEY

FEB 22 2022

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

INCorp SERVICES, INC.

hereby resigns as

Name of Registered Agent

Registered Agent for 10850 WILLOW RIDGE LOOP LLC

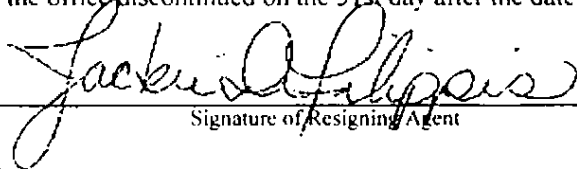
Name of Limited Liability Company

1.16000019018

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:

Jackie DeFilippis

Typed or Printed Name

Authorized Representative on behalf of InCorp Services, Inc.

Capacity

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2022 FEB 10 AM 10:31
STATE OF FLORIDA

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withdrawn limited liability company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