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Division of Corporations

## Florida Department of S

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\* .

Email Address: cls-agentresignations@wolterskluwer.com

## LLC REGISTERED AGENT RESIGNATION 326 S. HYDE PARK AVENUE, LLC

Certificate of Status	0
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## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

NRAI Services, Inc	2.	, hereby resigns as
Name of Registered Agent		
Registered Agent f	or	
326 S. HYDE PAR	K AVENUE, LLC	
	Name of Limited Liability Company	
L19000077611		
	<del></del>	
Docum	ient Number, if known	
		lity company at its last known address.
A copy of this resig	gnation was mailed to the above listed limited liabi	
A copy of this resig		
A copy of this resig	gnation was mailed to the above listed limited liabi	after the date on which this statement is $G \sim \mathbf{r}$
A copy of this resig	gnation was mailed to the above listed limited liabi ninated and the office discontinued on the 31st day a Namely Holar-Brown	after the date on which this statement is $G \sim \mathbf{r}$
A copy of this resig	gnation was mailed to the above listed limited liabi	after the date on which this statement is $G \sim \mathbf{r}$
A copy of this resigned. The agency is term	gnation was mailed to the above listed limited liabininated and the office discontinued on the 31st day a  **Takey Holes - Brope a  **Signature of Resigning Age	after the date on which this statement is $G \sim \mathbf{r}$
A copy of this resigned. The agency is term	gnation was mailed to the above listed limited liabininated and the office discontinued on the 31st day a  **Takey Holes - Brope a  **Signature of Resigning Age	ent 2024 HAR 14
A copy of this resignation of the agency is term	gnation was mailed to the above listed limited liabinated and the office discontinued on the 31st day a  **Marcy 7dar-Brown**  Signature of Resigning Age  f of an entity:	ent 2024 HAR 14
A copy of this resig	gnation was mailed to the above listed limited liabitinated and the office discontinued on the 31st day of Manage Helm - Brown Signature of Resigning Age of an entity:  NANCY HELM-BROWN	after the date on which this statement is

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

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