

LA2 000 403592

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

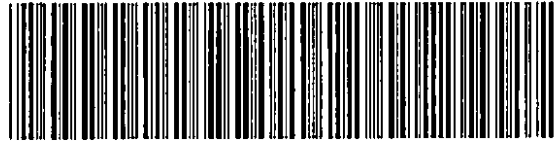
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 12864 S Shore Drive LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Amendment or Cancellation of Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mac Ross
Name of Person
Law Office of Kyle Felty, P.A.
Firm/Company
725 N AIA C-112
Address
Jupiter FL, 33477
City/State and Zip Code

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

For further information concerning this matter, please call:

Mac Ross at (561) 614-6606
Name of Person Area Code Daytime Telephone Number

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

AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY

Pursuant to section 605.0302(2), Florida Statutes, this limited liability company submits the following:

FIRST: The name of the limited liability company is: 12864 S Shore Drive LLC

SECOND: The Florida Document number of the limited liability company is: L22000403592

THIRD: The street address of the limited liability company's principal office is:
12864 S Shore Drive West Palm Beach FL 33410

The mailing address of the limited liability company's principal office is:
Same as above

FOURTH: The date the statement of authority became effective is: 10-5-2022

FIFTH: The statement of authority is cancelled.

OR

The amendment to the statement of authority is

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Justin Fygel
Signature of authorized representative

Justin Fygel
Typed or printed name of signature
member

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)