L07000024548

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SECRETARY OF STATE TAELAHASSEE, FLORIDA TI JUN 20 PH 3: 50

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	<u>Cay Club P</u>	roperties	SLLC	_	
	Name of Limite	d Liability	Company		
DOCUMENT NUMBER:	L07000024548				
The enclosed Resignation of Refor filing.	gistered Agent for	a Limited	d Liability Company and fee a	re submitted	
Please return all correspondence	e concerning this r	natter to th	he following:		
Holly Bo			_		
Name of F	erson				
Name of Firm	Company (Company		-		
14718 Calusa P Addre					
Fort Myers, I City/State and			-		
E-mail address: (to be used for for further information concern	_		-		
Holly Bower Name of Person	at (_	239)) 634-6096 & Daytime Telephone Number	-	
ranne of Letson		rica Code (a Day ante 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions	of section 608.416(2) of	or 608.509, Florida Statutes,	the undersigned,		
Holly A Bower Esq.			hereby resigns as		
	fame of Registered Agent				
Registered Agent for	Cay Club Properties LLC				
	Name of Limited	Liability Company			
L070000		_			
Document Numb	ber, if known				
A copy of this resignation	was mailed to the abov	e listed limited liability com	pany at its last known address.		
The agency is terminated a	and the office discontin	ued on the 31st day after the	date on which this statement is filed.		
•	2	12			
_	Sig	nature of Resigning Agent			
TC. *			į		
If signing on behalf of an e	entity:				
_					
	Typed				
_	C	apacity			
	FILING FE	ES:			
	\$ 85.00 A \$ 25.00 A	ctive limited liability compo dministratively dissolved/v ithdrawn limited liability c	any oluntarily dissolved/ ompany		

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

14 JUN 20 PM 3:50