

A13361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

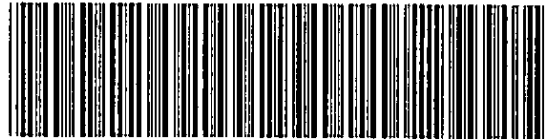
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600326808646

03/25/19 01016 025.8750

FILED
2019 MAR 25 PM 2:47
SEC. 1
FALL A. 100.00

R. WHITE

APR 04 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WEST ORANGE TOWNHOUSE LIMITED

Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A13361

The enclosed Resignation of Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Christian Fahrig, Esq.

Contact Person

Urban Thier & Federer, P.A.

Firm/Company

5782A S. Semoran Blvd.

Address

Orlando, FL 32822

City, State and Zip Code

fahrig@urbanthier.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christian Fahrig

Name of Contact Person

at (407)

245-8352

Area Code and Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for:

☒ \$87.50 Filing Fee

☐ \$140.00 (\$87.50 Filing Fee and \$52.50 Certified Copy Fee)

STREET ADDRESS:

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

MAILING ADDRESS:

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

**RESIGNATION OF REGISTERED AGENT
FOR
LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP**

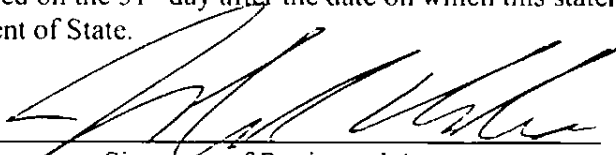
Pursuant to the provisions of section 620.1116, Florida Statutes, the undersigned,

URBAN, THIER, FEDERER & JACKSON, P.A., hereby resigns as
Name of Registered Agent

Registered Agent for WEST ORANGE TOWNHOUSE LIMITED,
Name of Limited Partnership or Limited Liability Limited Partnership

A13361
Florida Document Number, if known

The agent is terminated on the 31st day after the date on which this statement is filed by the Florida Department of State.


Signature of Registered Agent

If signing on behalf of an entity:

John L. Urban
Typed or Printed Name
as Vice-President of Urban Thier & Federer, P.A,
f/k/a Urban, Thier, Federer & Jackson, P.A.
Capacity

Filing Fee: \$87.50
Certified Copy (optional): \$52.50

FILED
2019 MAR 25 PM 2:47
STATE OF FLORIDA
TALLAHASSEE