B21000000542

(Requestor's Name)		
(Address)		
(Address)		
(City/S	State/Zip/Phone	#)
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PICK-UP	WAIT	MAIL
		,
(Busin	ess Entity Name	e)
(Docu	ment Number)	
Certified Copies	Certificates	of Status
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Special Instructions to Fili	ng Officer:	
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09/26/23--01024--012 **87.50

FILED Sep 26, 2023 08:00 AM Secretary of State

Ra Riveration

OCT 1 7 2023 D CUSHING

COVER LETTER

Division of Carporation	ıs.	
SUBJECT:	PARK VENIC	E, LP
Name of Lir	mited Partnership or Limited L	iability Limited Partnership
DOCUMENT NUMBER: B2	21000000542	-
The enclosed Resignation of Re	egistered Agent and fee(s)	are submitted for filing.
Please return all correspondence	e concerning this matter to	o:
MANPREE	T KAUR	
Contact P	erson	
		FILED
PARACORP INC		Sep 26, 2023 08:00 AM
T min Con	ipun <u>y</u>	Secretary of State
PO BOX 1	160568	
Addre	ess	
SACRAMENTO		
City, State and	I Zip Code	
E-mail address: (to be used for f	uture annual report notification	1)
For further information concern	ing this matter, please cal	II:
MANPREET KAU	R at (800	533.7272
Name of Contact Person	Area Cod	e and Daytime Telephone Number
Enclosed is a check made payab	ole to the Florida Departm	nent of State for:
₹\$87.50 Filing Fee	\$140.00 (\$87.50 Filing Fee	and \$52.50 Certified Copy Fee)
STREET ADDRESS:	MA	ILING ADDRESS:
Amendment Section		endment Section
Division of Corporations		sion of Corporations
Clifton Building 2661 Executive Center Circle		. Box 6327 hassee, FL 32314
Tallahassee, FL 32301	Tana	massec, 1 is 3 ad i t

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

Pursuant to the provi	isions of section 620.1116, Florida Statute	es, the undersigned,
PA	ARACORP INCORPORATED	, hereby resigns as
	Name of Registered Agent	g.,g.,
Registered Agent for	PARK VENICE Name of Limited Partnership or Limited I	
	·	Diability Limited Partnership
	00000542 nt Number, if known	
r iorida Documer	it Number, if known	
The agent is termir the Florida Departi	nated on the 31 st day after the date on v ment of State.	vhich this statement is filed by
	0005	
•	Signature of Registered Ag	ent
If signing on behal	f of an entity:	
	ABIGALE PETERSON	J
	Typed or Printed Name	
	Asst.Secretary	
•	Capacity	
Filing Fee:	\$87.50	FILED Sep 26, 2023 08:00 AM Secretary of State

\$87.50

Filing Fee:

Certified Copy (optional): \$52.50