H43718

(Re	questor's Name)	
`	,	
(AC	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	<u>(1)</u>
PICK-UP	MAIT	MAIL
(Ru	siness Entity Name	<u> </u>
(00	ameas Littly Hame	,
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Sangial Instructions to		
Special Instructions to	Filling Officer.	

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations	
V.F. LONGBOAT KEY III, INC.	
(Name of Corpora	tion)
DOCUMENT NUMBER: K43718	
The enclosed Resignation of Registered Agent for a Corpor	ration and fee are submitted for filing.
Please return all correspondence concerning this matter to t	he following:
Jeffrey A. Deutch	~`;
(Name of Person)	
Nelson Mullins Riley & Scarborough LLP	
(Name of Firm/Company)	
1905 NW Corporate Boulevard, Suite 310	
(Address)	_
Boca Raton, FL 33431	
(City/State and Zip Code)	_
For further information concerning this matter, please call:	
Jeffrey A. Deutch 561	343-6960
(Name of Person) (Area Cod	e & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ons 607.0503(2), 617.0502(2), 607.1509, 6F 617.1509,	
Florida Statutes, the undersigned.	Jeffrey Deutch	
	(Name of Registered Agent)	
hereby resigns as Registered Agen	V.F. LONGBOAT KEY III, INC.	
nereby resigns as Registered Agen	(Name of Corporation)	
K43718		
(Document Number, if known)		
A copy of this resignation was ma	iled to the above listed corporation at its last known address.	
The agency is terminated and the cathis statement is filed.	office discontinued on the 31st day after the date on which	
	(Signature of Resigning Agent)	
If signing on behalf of an entity:		
Jeffrey Deutch		
	(Typed or Printed Name)	
Partner		

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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

(Capacity)