

L020000010496

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L020000010496
10-5-04 OK
RALES

SEMPER WOODS

WEALTH ACCUMULATION, TAXATION & TRANSFER

October 1, 2004

PERSONAL AND CONFIDENTIAL

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Dixie Park, LLC

Dear Madam/Sir:

Enclosed please find the resignation of Jeffrey Quackenbush as manager and the resignation of Jonathan D. Woods as registered agent for DIXIE PARK LLC, A FLORIDA COMPANY. I have also enclosed checks for the respective filing fees. If you should have any questions in the interim please feel free to contact me.

Nishad A. Khan
Semper Woods, PA
425 W. Colonial Drive
Suite 204
Orlando, FL 32804

I can also be reached via telephone at (407) 650-8133.

Sincerely Yours,



Nishad A. Khan

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DIXIE PARK LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: L02000010496

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NESHAD A. KHAN
(Name of Person)

SEMPER WOODS PA
(Name of Firm/Company)

425 W. COLONIAL DRIVE SUITE 204
(Address)

ORLANDO FL 32804
(City/State and Zip Code)

For further information concerning this matter, please call:

NESHAD A. KHAN at (407) 650-8133
(Name of Person) (Area Code & Daytime 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
409 E. Gaines Street
Tallahassee, FL 32399

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

JONATHAN D. WOODS

(Name of Registered Agent)

, hereby resigns as

Registered Agent for

DEXIE PARK, LLC

(Name of Limited Liability Company)

LOZ000010496

(Document Number, if known)

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

(Signature of Resigning Agent)

If signing on behalf of an entity.

LL DEXIE PARK, LLC

(Typed or Printed Name)

(Capacity)

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/voluntarily dissolved/
withdrawn limited liability company

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

FILED
04 OCT -5 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA