L03 000000 2875

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 JAN 20 AM 6:42
SECRETARY OF STATE
TALLAHASSEE, FL

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2022 JAN 20 AM 10: 23

SECRETARY OF STATE
TALLAHASSEE, FL

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 7, 2022

DAVID MAINS
301 DAL HALL BLVD
LAKE PLACID, FL 33852

SUBJECT: HITAKEE, L.L.C.
Ref. Number: L03000002875

We have received your document for HITAKEE, L.L.C. and your check(s) totaling $87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 622A00000455

KARLSON LAW GROUP

Pamela T. Karlson, B.C.S.
Board Certified Real Estate Lawyer

Joy Bogaert, Attorney at Law

January 18, 2022

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

RE: Resignation of Registered Agent for an LLC
Hitakee, L.L.C., Document Number: L03000002875
File No. 438-16

Dear Sir or Madam:

Enclosed please find the following for filing in your office:

1. Your January 7, 2022, letter notifying us we submitted a Florida Corporation form, instead of an LLC form;
2. Cover Letter; and
3. Resignation of Registered Agent for a Limited Liability Company.

If you have any questions, or desire additional information, please do not hesitate to contact our office.

Sincerely,

Pamela T. Karlson, J.D., B.C.S.

PTK/drm

Enclosures as stated.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HITAKEE, L.L.C.
Name of Limited Liability Company

DOCUMENT NUMBER: L03000002875

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:

David R. Mains, Paralegal
Name of Person

KARLSON LAW GROUP, P.A.
Name of Firm/Company

301 Dal Hall Blvd.
Address

Lake Placid, FL 33852
City/State and Zip Code

info@karlsonlaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David R. Mains, Paralegal at (863) 465-5033
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:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

FILED
2022 JAN 20 AM 6:42
SECRETARY OF STATE
TALLAHASSEE, FL

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

PAMELA T. KARLSON, P.A. n/k/a KARLSON LAW GROUP, P.A. , hereby resigns as
Name of Registered Agent

Registered Agent for HITAKEE, L.L.C

Name of Limited Liability Company

L03000002875
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.

Pamela T. Karlson
Signature of Resigning Agent

If signing on behalf of an entity:

PAMELA T. KARLSON, P.A. n/k/a KARLSON LAW GROUP, P.A.
Typed or Printed Name

President
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

INHS17 (2/14)