

L040000047283

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

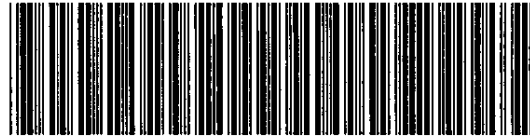
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2016 JUL 28 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER

AUG 1



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2016 JUL 29 PM 2:02
TALLAHASSEE

July 19, 2016

KEYSTONE LAW FIRM, P.A.
FRANK WOLLAND, ESQ.
12865 WEST DIXIE HWY, FL 2
NORTH MIAMI, FL 33161

SUBJECT: TRUE INVESTMENT PROPERTIES LLC
Ref. Number: L04000047283

We have received your document for TRUE INVESTMENT PROPERTIES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(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) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 416A00015052

KEYSTONE LAW FIRM, P.A.
LAW OFFICES OF FRANK WOLLAND, ESQ.
12865 West Dixie Highway
Second Floor
North Miami, Florida 33161

FRANK WOLLAND, ESQ.
Member of the Florida Bar
SHAYNA GLICKFIELD, ESQ.
Florida and New York Bar

Tel: 305-899-8588
Fax: 305-892-8434

July 25, 2016

Division of Corporation
PO Box 6327
Tallahassee, FL 32314

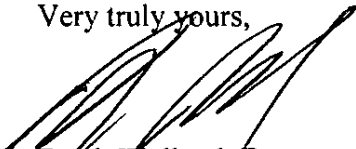
RE: Resignation of Registered Agent for a Corporation/ True Investment Properties, LLC.

To Whom in May Concern,

Enclosed please find the signed Resignation of Registered Agent for a Corporation for the above-referenced matter.

If you have any questions or concerns please do not hesitate to contact our office.

Very truly yours,



Frank Wolland, Esq.

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

FRANK WOLLAND

Name of Registered Agent

, hereby resigns as

Registered Agent for TRUE INVESTMENT PROPERTIES

Name of Limited Liability Company

L04000047283

Document Number, if known

FILED
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TALLAHASSEE, FLORIDA

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:

FRANK WOLLAND

Typed or Printed Name

REGISTERED AGENT

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