## L05000001707

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## **COVER LETTER**

SUBJECT: Name of Limited Liabilit	y Company
DOCUMENT NUMBER: L05000001707	
The enclosed Resignation of Registered Agent for a Limite for filing.	ed Liability Company and fee are submitted
Please return all correspondence concerning this matter to	the following:
JEFFREY A. DEUTCH	
Name of Person	_
Nelson Mullins Riley & Scarborough LLP	
Name of Firm/Company	_
1905 NW Corporate Boulevard, Suite 310	
Address	<del>_</del>
Boca Raton, FL 33431	
City/State and Zip Code	_
jeffrey.deutch@nelsonmullins.com	
E-mail address: (to be used for future annual report notification)	_
For further information concerning this matter, please call:	
Jeffrey A. Deutch 561 at (	343-6960
Name of Person Area Code	2 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

Registration Section Division of Corporations

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605,0115.	Florida Statutes, the undersi	igned.		
Jeffrey A. Deutch P.A.	, hereby resigns as				
· · · · · · · · · · · · · · · · · · ·	Name of Registered Agent				
Registered Agent for	HARBORAGE COTTAGE	ES DEVELOPMENT, LLC			
	Name of Limite	ed Liability Company		,	
L05000001707					
Document l	Number, if known	<del></del>			
A copy of this resignat	tion was mailed to the ab	ove listed limited liability co	ompany at its last k	nown address.	
The agency is terminal	ted and the office discont	inued on the 31st day after t	he date on which th	his statement is	filed.
		My A Att	E	2024 AUG SECRET	T
If signing on behalf of	an entity:			28	Ŋ.
	Jeffrey A. Deutch				्रा <u>व्य</u>
	Туг	oed or Printed Name		<u> </u>	The same
	President			AN 10: 37	
		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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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