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#### **COVER LETTER**

SUBJECT: Name of Limited Liability	Company
DOCUMENT NUMBER: 1.05000004552	_ <del></del>
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee are submitted
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	-
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	343-6960
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Registration Section Division of Corporations

TO:

### 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

Pursuant to the provision	ons of section 605.0115, Flo	orida Statutes, the undersigned,
Jeffrey A. Deutch, P.A.		, hereby resigns as
	Name of Registered Agent	
Registered Agent for	IARBORAGE YACHT CLU	B DEVELOPMENT. LLC
	Name of Limited I	iability Company
1.05000004552		
Document N	umber, if known	
A copy of this resignati	ion was mailed to the above	Elisted limited liability company at its last known address.
The agency is terminate	ed and the office discontinu	ed on the 31st day after the date on which this statement is filed.
	Sign	A Dubband Agent .
If signing on behalf of	an entity:	
	Jeffrey A. Deutch	
	Typed	or Printed Name
	President	
	- C;	pacity

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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