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## **COVER LETTER**

Registration Section Division of Corporations PG CONVERSION HOLDINGS LLC SUBJECT: Name of Limited Liability Company DOCUMENT NUMBER: 1.05000029315 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: JEFFREY A. DEUTCH Name of Person Nelson Mullins Riley & Scarborough LLP Name of Firm/Company 1905 NW Corporate Boulevard, Suite 310

City/State and Zip Code

jeffrey.deutch@nelsonmullins.com

Boca Raton, FL 33431

TO:

E-mail address: (to be used for future annual report notification)

Address

For further information concerning this matter, please call:

Jeffrey A. Deutch Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Pursuant to the provision	ons of section 605.0115, Florida Stat	utes, the undersigned,	
Jeffrey A. Deutch P.A.		, hereby resigns a	ıs
	Name of Registered Agent		
Registered Agent for $\frac{1}{2}$	PG CONVERSION HOLDINGS LLC		
	Name of Limited Liability Co	mpany	·
L05000029315			
Document N	Sumber, if known		
A copy of this resignat	ion was mailed to the above listed lin	nited liability company at its las	t known address.
The agency is terminat	ed and the office discontinued on the	31st day after the date on which	h this statement is filed.
	Signature of Re	esigning Agent	2024 AUG SECRET
If signing on behalf of	an entity:		28
	Jeffrey A. Deutch		~ ~ <b>~~</b>
	Typed or Printed N	lame	F.F. S
	President		9: 57 STATE TORID
	Capacity		5A 🗀

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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