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2021

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SCHECHTER PG LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L05000029709	
The enclosed Resignation of Registered Agent for a Limited for filing.	l Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne 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 Daytime Telephone Number
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Pursuant to the provisions	of section 605.0115. Flor	ida Statutes, the undersigned	1.		
Jeffrey A. Deutch P.A.	h P.A. , hereby resigns as				
N.	ame of Registered Agent		.,		
Registered Agent for SCH	ECHTER PG LLC				
	Name of Limited Lia	ability Company		·	
L05000029709					
Document Numb	er, if known				
•		listed limited liability compa	•		
The agency is terminated a	Xm,	d on the 31st day after the day	ate on which this ARASSETARY	AUG 28	
If signing on behalf of an o	-		0.5.00 1.5.50		
J. —	effrey A. Deutch	Printed Name	<u> </u>	20	
P	resident	rimed Name			
	Сар	acity			

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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 Tailahassee, FL 32314