105000038109

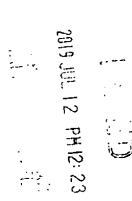
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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CAMBELLINGS IN COMMENTS



COVER LETTER

Registration Section Division of Corporations

TO:

23 South Rounty I.I.C		
SUBJECT: Name of Limi	ted Liability	Company
DOCUMENT NUMBER: L05000038109	tou Buomity	Company
The enclosed Resignation of Registered Agent for filing.	or a Limited	Liability Company and fee are submitted
Please return all correspondence concerning this	matter to th	e following:
Sarah N. Huertas		
Name of Person		
Name of Firm/Company		
501 Miller Road		
Address		
Coral Gables, Fl 33146		
City/State and Zip Code		
huertas2@aol.com		
E-mail address: (to be used for future annual report n	otification)	
For further information concerning this matter, p	lease call:	
Sarah N. Huertas	305	934-6244 Daytime Telephone Number
Name of Person	Area Code	Daytime Telephone Number
Enclosed is a check made payable to the Florida liability company or \$25.00 for an administrative liability company.	Department ely dissolve	t of State for \$85.00 for an active limited d, voluntarily dissolved or withdrawn limited
MAILING ADDRESS:	STREE	ET ADDRESS:
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	

Division of Corporations
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

INHS17 (2/14)

P.O. Box 6327

Tallahassee, FL 32314

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions	of section 605.0115, Florida Statutes, the un	dersigned,
Sarah N. Huertas		, hereby resigns as
N	ame of Registered Agent	(
Registered Agent for 23 5	South Bounty Lane, LLC	
	Name of Limited Liability Company	,
L05000038109		
Document Numb	er, if known	
A copy of this resignation	was mailed to the above listed limited liabili	ty company at its last known address.
The agency is terminated a	and the office discontinued on the 31st day at a sure of Resigning Agen	25
If signing on behalf of an e	entity:	三 三
S	Sarah N. Huertas	12
_	Typed or Printed Name	PH I2: 23

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ withdrawn limited liability company