

LOS000072613

Division of Corporations

Florida Department of State

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Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ROGERS, TOWERS, BAILEY, ET AL

Account Number : 076666002273

Phone : (904)398-3911

Fax Number : (904)396-0663

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: jcassell@rtlaw.com

LLC REGISTERED AGENT RESIGNATION

J&M DEVELOPMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

AUG 30 2021

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COVER LETTER

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TO: Registration Section
Division of Corporations

SUBJECT: J&M Development, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L05000072613

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:

H. Joseph O'Shields

Name of Person

Rogers Towers, P.A.

Name of Firm/Company

1301 Riverplace Blvd. Suite 1500

Address

Jacksonville, Florida 32207

City/State and Zip Code

joshields@rrlaw.com

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

For further information concerning this matter, please call:

H. Joseph O'Shields

at (904) 673-1692

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

H. Joseph O'Shields

, hereby resigns as

Name of Registered Agent

Registered Agent for J&M Development, LLC

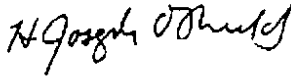
Name of Limited Liability Company

L05000072613

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



Signature of Resigning Agent

If signing on behalf of an entity:

H. Joseph O'Shields

Typed or Printed Name

Officer/Registered Agent

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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