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S. HAWKES

SEP 1 5 2009

EXAMINER

COVER LETTER

SUBJECT: XECUTIVE RE	AL	TY GI	GROUP, LLC	
Name of Lin	incu i	Liaumi	my Company	
DOCUMENT NUMBER:	L05000086444			
The enclosed Resignation of Registered Agent for filing.	for a	Limite	ited Liability Company and fee are submitte	:d
Please return all correspondence concerning the	s mai	tter to 1	to the following:	
Greg Hundley Name of Person			<u></u>	
Name of Person				
Name of Firm / Company				
Name of Firm/Company				
11360 Jog Road, Suite 200			<u> </u>	
Audress				
Palm Beach Gardens, FL 33418	3		<u> </u>	
Etty/State and Zip Code			v .	
greg@ghundley.com E-mail address: (to be used for future annual repor	. matif	iantian)		
E-mail address: (to be used for future annual repor	поин	ication)	n)	
For further information concerning this matter,	pleas	se call:	.II:	
Grea Hundley a	. (561) 635-2245	

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Name of Person

TO:

Amendment Section Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Area Code & Daytime Telephone Number

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of se	ction 608.416(2) or 608.509), Florida Statutes, the undersign	ed,
Grego	ory C. Hundley	, hereby resigns a	S
	f Registered Agent	,, ,	FOR 80
Registered Agent for	Xecutive Realty Group, L		
	Name of Limited Liability Co	ompany	
L050000864			7. 57 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6
·		mited liability company at its las	t known address.
The agency is terminated and the	Delh	e 31st day after the date on which	n this statement is filed.
If signing on behalf of an entity	; ;		
	Typed or Printed I	Name	
	Capacity		

FILING FEES:

\$ 85.00 \$ 25.00

Active limited liability company
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withdrawn limited liability company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