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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BEVEDDY PROPERTIES LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L06000085710

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:

Gary Kickery

Name of Person

Name of Firm/Company

4200 Canterbury Dr

Address

Holiday FL 34690

City/State and Zip Code

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

For further information concerning this matter, please call:

Gary Kickery

Name of Person

at (413) 841-5857

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Gary Kickery _____, hereby resigns as

Name of Registered Agent

Registered Agent for BEVEDDY PROPERTIES LLC

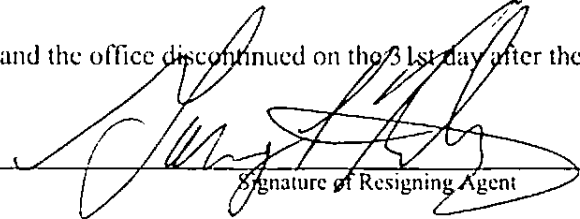
Name of Limited Liability Company

L06000085710

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:

Gary Kickery

Typed or Printed Name

Capacity

FILED
2022 NOV 28 PM 2:41
TALLAHASSEE, FLORIDA
CLERK OF THE CIRCUIT COURT

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withdrawn limited liability company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