

1070000017066

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(Address)

(Address)

(City/State/Zip/Phone #)

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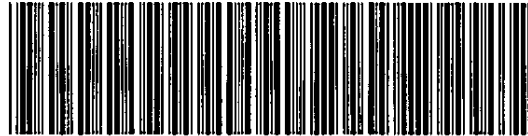
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Blackwater Investors, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L07000017066

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:

Allen Boyd
Name of Person

Blackwater Investors, LLC
Name of Firm/Company

806 Guitman Hwy. N
Address

Greenville, FL 32331
City/State and Zip Code

finlay0645@live.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Allen Boyd at (850) 997-6222
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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2016 APR 14 4:05:53
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SECRETARY OF STATE

**STATEMENT OF RESIGNATION OF REGISTERED AGENT
FOR A LIMITED LIABILITY COMPANY**

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

Jennifer Tuten

Name of Registered Agent

, hereby resigns as

Registered Agent for Blackwater Investors, LLC

Name of Limited Liability Company

L07000017066

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.

Jennifer Tuten

Signature of Resigning Agent

If signing on behalf of an entity:

Jennifer Tuten

Typed or Printed Name

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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TALLAHASSEE, FLORIDA

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