

607000069663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300113388423

12/31/07--01047--015 \*\*340.00

FILED  
2001 DEC 31 PM 12:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE  
JAN - 2 2008  
EXAMINER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Preserve Tampa Group LLC  
(Name of Limited Liability Company)

**DOCUMENT NUMBER:** LO 70000 69663

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:

Alejandro Tobon  
(Name of Person)

Preserve Tampa Group LLC  
(Name of Firm/Company)

10943 Country Way Blvd  
(Address)

Tampa FL 33626  
(City/State and Zip Code)

For further information concerning this matter, please call:

Alejandro Tobon at (813) 758-7463  
(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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:**

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

FILED  
2007 DEC 31 PM 12:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Jorge Lassas

(Name of Registered Agent)

, hereby resigns as

Registered Agent for

Preserve Tampa Group LLC

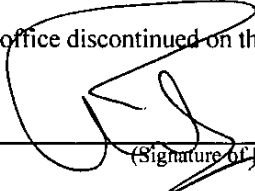
(Name of Limited Liability Company)

L07000069663

(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:

Lassco Properties LLC / Jorge Lassas

(Typed or Printed Name)

Managing Member.

(Capacity)

FILED  
2017 DEC 31 PM 12:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### 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