101000072669

(Rec	questor's Name)	
(* 1-1	, . ,	
(Add	dress)	
(Add	iress)	
/Cit	//State/Zip/Phon	n #\
(City	//State/Zip/Filon	e +)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Na	me)
(Doc	cument Number)	1
Certified Copies	Certificate	s of Status
Special Instructions to F	Filing Officer.	
١,	11201.10	
WMils		

Office Use Only



300435224703

08/28/24--01014--014 **2525.00

COVER LETTER

SUBJECT:	Name of Limited Li	ability Company	
DOCUMENT NUMBER: L07000	0072669		
The enclosed Resignation of Regi for filing.	stered Agent for a L	imited Liability Company a	and fee are submitte
Please return all correspondence of	concerning this matte	er to the following:	
JEFFREY A. DEUTCH			
Name of Per	rson		
Nelson Mullins Riley & Scarborough L	LP		
Name of Firm/C	ompany		
1905 NW Corporate Boulevard, Suite 3	10		
Address			
Boca Raton, FL 33431			
City/State and Z	ip Code		
jeffrey.deutch@nelsonmullins.com			
E-mail address: (to be used for futu	ire annual report notifica	tion)	
For further information concerning	g this matter, please	call:	
Jeffrey A. Deutch	561 at (343-6960 Code Daytime Telephone N	
Name of Person	Area	Code Daytime Telephone N	lumber

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Registration Section Division of Corporations

TO:

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 provi	isions of section 605.0115. Florida Statutes, the undersigned.	
Jeffrey A. Deutch P.A	t. hereby resigns a	18
	Name of Registered Agent	
Registered Agent for	BAINBRIDGE KINGSPORT INVESTORS, LLC	
	Name of Limited Liability Company	
L07000072669		
Documen	nt Number, if known	
A copy of this resign	nation was mailed to the above listed limited liability company at its las	st known address?
The agency is termin	nated and the office discontinued on the 31st day after the date on which	h this statement is file
	Signature of Resigning Agent	:
If signing on behalf	of an entity:	• • •
	Jeffrey A. Deutch	:
	Typed or Printed Name	
	President	
	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