107000094412

<u> </u>
(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



400330358704

08/10/19--01000 013 ••8:.50

19 JUN 10 AM 9: 45
SECRETARY OF STATE
TALL AHASSEF, FLORIDA

JUH 22 **2019** T **SCHROEDE**R

COVER LETTER

TO: Amendment Section Division of Corporations PATRIOT LAND DEVELOPMENT LLC. (Name of Corporation) DOCUMENT NUMBER: L07000094412 The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Michael Wilson (Name of Person) Patriot Land Development LLC (Name of Firm/Company) 149 Terra Mango Loop (Address) Orlando, FL 32835 (City/State and Zip Code)

For further information concerning this matter, please call:

Patrick C. Crowell, Esq. at (407-)251-1131

(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.	1500
Datial Comment DA	1505,
(Name of Registered Agent)	
hereby resigns as Registered Agent for Patriot Land Development L	.LC.
(Name of Corporation)	
L07000094412	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known the agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	
(Signature of Resigning Agent)	
If signing on behalf of an entity:	
Patrick C. Crowell	HIL BUN 10 SECRETAR TALL AHASS
(Typed or Printed Name)	ASS.
Director	
(Capacity)	202 202 9:1

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314