

07:25 AM TO: 18506176383 FROM: 5616272236
L08000046629

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000358484 3)))



H220003584843ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.
Account Number : 073222003555
Phone : (561)686-3307
Fax Number : (561)290-1590

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2022 OCT 19 AM 9:07

LLC REGISTERED AGENT RESIGNATION
HIATT CHILDREN'S CENTER, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2022 OCT 19 10:52

FAN: H22000358484 3

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HIATT CHILDREN'S CENTER, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L08000046629

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:

PHILIP M. DICOMO, ESQ.

Name of Person

NASON, YEAGER, GERSON, HARRIS & FUMERO, P.A

Name of Firm/Company

3001 PGA Blvd., Suite 305

Address

PALM BEACH GARDENS, FL 33410

City/State and Zip Code

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

For further information concerning this matter, please call:

SUSIE DAVERSA

Name of Person

at (561) 627-4839

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

FAN: H22000358484 3

FAN: H22000358484 3

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

NASON, YEAGER, GERSON, HARRIS & FUMERO, P.A. , hereby resigns as

Name of Registered Agent

Registered Agent for HIATT CHILDREN'S CENTER, LLC

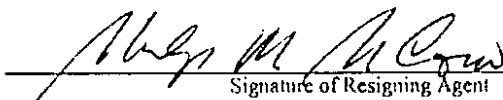
Name of Limited Liability Company

L08000046629

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:

PHILIP M. DICOMO, ESQ.

Typed or Printed Name

SHAREHOLDER

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

INHS17 (2/14)

FAN: H22000358484 3