

**L08000095382**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : A1A REGISTERED AGENT INC.  
Account Number : I20090000032  
Phone : (561) 792-2236  
Fax Number : (561) 202-6082

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

Email Address: \_\_\_\_\_

RECEIVED

2020 OCT 27 PM 2:15

**LLC REGISTERED AGENT RESIGNATION  
JAMAL PROPERTY GROUP LLC**

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

2020 OCT 27 PM 2:07

FILED

OCT 28 2020

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Corporate Filing Menu

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

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

A1A REGISTERED AGENT INC.

\_\_\_\_\_  
Name of Registered Agent

, hereby resigns as

Registered Agent for JAMAL PROPERTY GROUP LLC

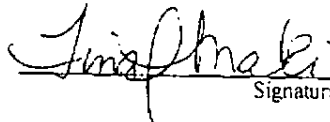
\_\_\_\_\_  
Name of Limited Liability Company

L08000095382

\_\_\_\_\_  
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:

TINA MAKI

\_\_\_\_\_  
Typed or Printed Name

DP

\_\_\_\_\_  
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withdrawn limited liability company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  
SECRETARY OF STATE

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