# L09000055697

(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:				
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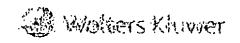
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2023 AUG 17 PM 3: 52





CT Corporation

28 Liberty St. New York, NY 10005

Phone (212) 894 8940 www.ct.wolterskluwer.com www.wolterskluwer.com

August 16, 2023

Department of State Division of Corporations Registration Section The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

RE: Resignation of Agent for: RCC II HOLDINGS, LLC

Dear Sir or Madam:

We enclose herewith a Statement of Resignation of Registered Agent for a Limited Liability Company, by the agent for service of process for the above named company. Also enclosed is our check in the amount of \$85.00 each to cover the filing fee.

Please advise us once the resignation of agent has been filed and issue whatever evidence of filing that my be usual. We have also enclosed a stamped self-addressed envelope for your convenience in replying or you can email me at my email address below.

Very truly yours,

C T Corporation System

Marie Hauer, Assistant Secretary
On behalf of Corpdirect Agents, Inc.
marie.hauer@wolterskluwer.com

Enclosure

#### COVER LETTER

RCC II HOLDINGS	S, LLC	
SUBJECT:	Name of Limited Liability	Company
DOCUMENT NUMBER:	-	
The enclosed Resignation of Refor filing.	gistered Agent for a Limited	Liability Company and fee are submitted
Please return all correspondence	e concerning this matter to th	e following:
Marie Hauer		
Name of F	Person	
C T Corporation System		
Name of Firm	/Company	
28 Liberty St.		
Addres	SS	
New York, NY 10005		
City/State and	Zip Code	
E-mail address: (to be used for fi	iture annual report notification)	
For further information concerni	ing this matter, please call:	
Marie Hauer	212	894-8940
Name of Person	at (at ()	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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 provisi	ions of section 605.01	15. Florida Statutes, the un	idersigned.	
CORPDIRECT AGENTS, INC			, hereby resigns as	
	Name of Registered Ag		nereby resigns as	
Registered Agent for _	RCC II HOLDINGS.	LLC	<u>.                                    </u>	
	Name of Li	mited Liability Company		<u>-</u>
L09000055697				
Document ?	Number, if known			
A copy of this resignat	tion was mailed to the	above listed limited liabili	ty company at its last l	known address.
The agency is terminal	ted and the office disc	ontinued on the 31st day at	fter the date on which t	this statement is filed.
	Marin	Signature of Resigning Agen	ıt	
If signing on behalf of				
	Marie Hauer			
		Typed or Printed Name		70
	Assistant Secretary			23 A
	FILING \$ 85.00 \$ 25.00	Capacity  FEES: Active limited liability Administratively dissol withdrawn limited liab	company lved/ voluntarily disso	FILED 2023 AUG 17 PH 3: 52 SECRET ARY OF STATE

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