

LO9000078752

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

From: Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC REGISTERED AGENT RESIGNATION
SUNCOAST HOLDING GROUP LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$85.00

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S. YOUNG

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Suncoast Holding Group LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L09000078752

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:

Isaac D. Robles

Name of Person

Suncoast Holding Group LLC

Name of Firm/Company

222 Lakeside Circle

Address

Sunrise, Florida 33328

City/State and Zip Code

ldrobes@yahoo.com

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

For further information concerning this matter, please call:

Isaac D. Robles

at 786 395-0526

Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA
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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,

Armando A. Rodriguez

Name of Registered Agent

, hereby resigns as

Registered Agent for **Suncoast Holding Group LLC**

Name of Limited Liability Company

L09000078752

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:

Typed or Printed Name

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)

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