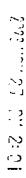


(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	٦
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11/27/23--010/6--018 **85.00





Swiss Vacation House, LLC Best Vacation Rentals in Clermont

13114 Skiing Paradise Blvd. Clermont, Florida 34711 Tel: #352-429-2178

To Whom It May Concern.

DATE, 11/18/2023

Me, Alexandre de Nobrega dos Santos , Owner of Swiss Vacation Houses LLC, above. I am a property manager of more than 20 properties here onsite. I recently terminated my service with the following owner:

Stephane Georgeon, owner of house 22 located at 7522 Swiss Fairways Ave, Clermont 34711 Florida. He is the owner of STEVER LLC, and I have no more interest to be his registered agent. Please remove me as soon as possible. Here attached the payment check fee # 4983

Sincerely.

Alexandre de Nobrega dos Santos

Owner-Manager





Winners of: Best of South Lake

2020, 2022 & 2023!! in Vacation Rentals

Phone: + 1 (352)-429-2178

Web: www.swissvacationhouses.com

Email: info@swissvacationhouses.com

Swiss Vacation Houses LLC

13114 Skiing Paradise Blvd. Clermont, FL 34711







COVER LETTER

Division of Corporations
SUBJECT: Steven
DOCUMENT NUMBER: TEV9 WO 103 90 -
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:
DE NOBREGA DOS SANTOS ALEXANDRE
Swiss Vacaction Louses LLC Name of Firm/Company
13114 SKING PARADISE BLVD
CLERNONT 34711 FLORIDA City/State and Zip Code
KATTY. PARENT @ GD Ai L. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
KATTY PARENT at (352), 978 62 55 Name of Person at (352), 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

TO: Registration Section

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)