

L10 000027718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

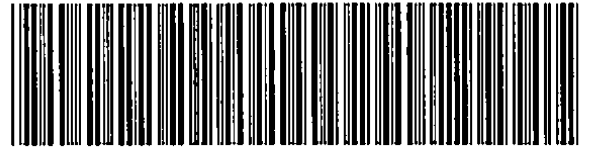
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



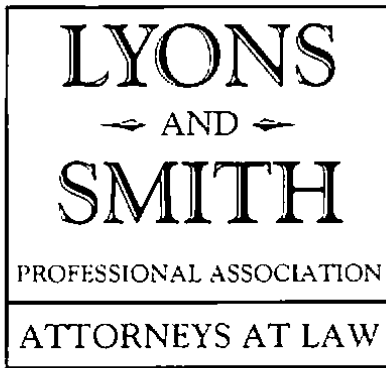
600331265116

07/05/19--01030--003 **85.00

FILED
2019 JUL -5 AM 9:17
NOT RECORDED

Y SULKER

JUL 17 2019



Miami Office

1230 NW 7th Street
Miami, Florida 33125
305-324-1100 - Office
305-324-1054 - Facsimile
www.lyonsandsmith.com

Hollywood Office

4700 Sheridan Street, Suite G
Hollywood, Florida 33021
954-889-0983

MICHAEL D. LYONS

RICHARD W. LYONS - RETIRED
GARY V. SMITH, Of Counsel
Stephanie B. Lyons-
Non-Practicing Attorney

June 28, 2019

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

Re: Raul Segredo/900 Biscayne Investment LLC
Statement of Resignation of Registered Agent for a Limited Liability
Company
900 Biscayne Boulevard – Unit# 3206
Miami, FL 33132
File # 19037

Attn: Registration Section

Please see attached documents and included check for the Statement of Resignation of Registered Agent for a Limited Liability Company.

If you have any questions, please feel free to contact our office.

Very truly yours,

Brian Jimenez
Office Assistant
bjimenez@lyonsandsmith.com

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 900 BISCAYNE INVESTMENT LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L10000027718

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:

GARY V. SMITH, ESQ.

Name of Person

LYONS AND SMITH, P.A.

Name of Firm/Company

1230 NW 7 ST.

Address

MIAMI, FL 33125

City/State and Zip Code

rsegredo@avionica.com

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

For further information concerning this matter, please call:

GARY V. SMITH, ESQ.

Name of Person

at (305) 324-1100

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

FBI
2019 JUL -5 AM 9:17
REC'D
FBI

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

SORAYA A. GATAS

Name of Registered Agent

, hereby resigns as

Registered Agent for 900 BISCAYNE INVESTMENT LLC

Name of Limited Liability Company

L10000027718

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:

SORAYA A. GATAS

Typed or Printed Name

MANAGER / REGISTERED AGENT

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