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

From:

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2024 JAN 16

To:

Account Name	:	C T CORPORATION	SYSTEM
Account Number	:	FCA00000023	
Phone	÷	(614)280-3338	
Fax Number	:	(614)573-3996	

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

Email Address: <u>cls-agentresignations@</u>wolterskluwer.com

LLC REGISTERED AGENT RESIGNATION MAC BROWNS HOTEL, LLC

Certificate of Status	0
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Page Count	01
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JAN 17 2024 Help

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To:

____, hereby resigns as

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY J,

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

CORPDIRECT AGENTS, INC

Name of Registered Agent

Registered Agent for _____

Name of Limited Liability Company

L10000057381

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.

Mancy Helm - Brown Signature of Resigning Agent

If signing on behalf of an entity:

NANCY HELM-BROWN

Typed or Printed Name		
ASSISTANT SECRETARY	33	ċ,
Capacity		ر. ب

FILING	EFFe.	. ``
\$ 85.00 \$ 25.00	Active limited liability company Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company	i6 H7
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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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